

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L14000143112

Entity Name: WORK CAT TRANS GULF, LLC**Current Principal Place of Business:**821 SOUTH NEWPORT AVENUE
TAMPA, FL 33606**Current Mailing Address:**821 SOUTH NEWPORT AVENUE
TAMPA, FL 33606 US**FEI Number:** 47-3857780**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOFFMAN, HENRY P
821 SOUTH NEWPORT AVENUE
TAMPA, FL 33606 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** HENRY P. HOFFMAN

08/07/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HOFFMAN, HENRY P
Address 821 SOUTH NEWPORT AVENUE
City-State-Zip: TAMPA FL 33606

Title AMBR
Name WORK-CAT ENGINEERING, LLC
Address 6505 BURNHAM CIRCLE
City-State-Zip: PONTE VEDRA BEACH FL 32082

Title AUTHORIZED MEMBER
Name RALEY, CHRISTOPHER L
Address 821 SOUTH NEWPORT AVENUE
City-State-Zip: TAMPA FL 33606

Title AUTHORIZED MEMBER
Name GABRIELSON, RICK
Address 821 SOUTH NEWPORT AVENUE
City-State-Zip: TAMPA FL 33606

Title AUTHORIZED MEMBER
Name KEMMSIES, WALTER
Address 821 SOUTH NEWPORT AVENUE
City-State-Zip: TAMPA FL 33606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HENRY P HOFFMAN

MANAGER

08/07/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date