## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000024719

Entity Name: LOMAX INVEST, LLC

**Current Principal Place of Business:** 

1505 LEGENDS BLVD

UNIT 3

CHAMPIONSGATE, FL 33896

**Current Mailing Address:** 

8297 CHAMPIONSGATE BLVD UNIT 200

CHAMPIONSGATE, FL 33896 US

FEI Number: 47-4180886 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HEXAGON INTERNATIONAL, INC 8297 CHAMPIONSGATE BLVD UNIT 200 CHAMPIONSGATE, FL 33896 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:

**Electronic Signature of Registered Agent** 

Date

FILED Apr 29, 2019

**Secretary of State** 

4971473738CC

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

NameBAUD, MAXENCENameRIZZO, LAURENCEAddress1505 LEGENDS BLVD.Address1505 LEGENDS BLVD.

City-State-Zip: CHAMPIONSGATE FL 33896 City-State-Zip: CHAMPIONSGATE FL 33896

Title MANAGER

Name DIVAY, ANTOINE

Address 1505 LEGENDS BLVD

UNIT 3

City-State-Zip: CHAMPIONSGATE FL 33896

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: BAUD , MAXENCE

Electronic Signature of Signing Authorized Person(s) Detail

MGR 04/29/2019

Date