| 360 RAINBO | iling Address: | | | |
|---|---|-------------------------------------|---|-----------|
| | DW BLVD. ALLS, NY 14303 US | | | |
| FEI Number | r: 81-3564261 | | Certificate of Status Desired: Yes | |
| Name and A | Address of Current Registered Agen | t: | | |
| GRENGA, PAU ATTN: RAY MU PO BOX 282 INDIAN ROCKS | | | | |
| The above name | d entity submits this statement for the purpose of chan | ging its registered office or regis | tered agent, or both, in the State of Florida | |
| SIGNATURE: PAUL GRENGA | | | 0 | 1/17/2019 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized | Person(s) Detail : | | | |
| Title | AMBR | Title | AMBR | |
| | GRENGA, PAUL A | Name | MUNDT, RAYMOND | |
| Name | | | | |
| Name Address | 360 RAINBOW BLVD. | Address | PO BOX 282 | |

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: PAUL A. GRENGA

MR.

01/17/2019

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000021378

Entity Name: ONE ECHO FOXTROT LLC

Current Principal Place of Business:

360 RAINBOW BLVD. NIAGARA FALLS, NY 14303

FILED Jan 17, 2019 Secretary of State 1336396619CC

Electronic Signature of Signing Authorized Person(s) Detail