| FEI Number: 90-0810360   |  | Certificate of Status Desired: No |                        |                    |
|--|--|-----------------------------------|------------------------|--------------------|
| Name and Address of Current Registered Agent:  |  |                                   |                        |                    |
| DEMKO, DAN<br>586 BAYSIDE DI<br>FT. MYERS, FL  |  |                                   |                        |                    |
| 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. |  |                                   |                        |                    |
| <u></u>  |  |                                   |                        |                    |
| SIGNATURE  | DAN DEMKO                                |                                   |                        | 01/22/2018         |
| SIGNATURE  | Electronic Signature of Registered Agent |                                   |                        | 01/22/2018<br>Date |
|  |  |                                   |                        |                    |
|  | Electronic Signature of Registered Agent | Title                             | MGR                    |                    |
| Authorized F   | Electronic Signature of Registered Agent | Title<br>Name                     | MGR<br>DUNGAN, MICHAEL |                    |

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. 01/22/2018 SIGNATURE: MICHAEL DUNGAN

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: RES POLYFLOW LLC

## **Current Principal Place of Business:**

8584 E WASHINGTON ST #304 CHAGRIN FALLS, OH 44023

DOCUMENT# L16000162963

#### **Current Mailing Address:**

8584 E WASHINGTON ST #304 CHAGRIN FALLS. OH 44023 US

City-State-Zip: CHAGRIN FALLS OH 44023

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#### 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### FILED Jan 22, 2018 Secretary of State CC2296033414

Date

MANAGER

City-State-Zip: CHAGRIN FALLS OH 44023