

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000163174

**Entity Name:** THE TROXLINE L.L.C.

**Current Principal Place of Business:**

826 SOUTH ST  
KEY WEST, FL 33040

**Current Mailing Address:**

1005 DUAL PARKS RD  
APEX, NC 27502 US

**FEI Number: 81-4033717**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PAVEL, TROSTYANSKIY  
826 SOUTH ST  
KEY WEST, FL 33040 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

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           TROSTYANSKIY, PAVEL  
Address        1005 DUAL PARKS RD  
City-State-Zip: APEX NC 27502

Title           MANAGER  
Name           KRYVOGUZ, KSENIIA  
Address        1005 DUAL PARKS RD  
City-State-Zip: APEX NC 27502

*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: PAVEL TROSTYANSKIY**

**MANAGER**

**03/09/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date