

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000126692

Entity Name: COMPLETE ALUMINUM FABRICATORS, LLC

Current Principal Place of Business:

2614 TAMIAMI TRAIL N #503
NAPLES, FL 34103

Current Mailing Address:

2614 TAMIAMI TRAIL N #503
NAPLES, FL 34103 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MCPHILLIPS, EMILY S
2614 TAMIAMI TRAIL N #503
NAPLES, FL 34103 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 MGR
Name MCPHILLIPS, RICHARD H III
Address 2614 TAMIAMI TRAIL N #503
City-State-Zip: NAPLES FL 34103

Title MGR
Name MCPHILLIPS, EMILY S
Address 2614 TAMIAMI TRAIL N #503
City-State-Zip: NAPLES FL 34103

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: EMILY MCPHILLIPS

MANAGING MEMBER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date