

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000155957

**Entity Name:** SAFE FUEL SYSTEMS, LLC**Current Principal Place of Business:**860 W 84TH ST  
HIALEAH, FL 33014**Current Mailing Address:**6710 N SCOTTSDALE RD #250  
SCOTTSDALE, AZ 85253**FEI Number:** 65-1129489**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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 CEO  
Name FORD, RUSSELL W.  
Address 6710 N. SCOTTSDALE ROAD  
SUITE 250  
City-State-Zip: SCOTTSDALE AZ 85253

Title SECRETARY  
Name ROSEBOROUGH, DIANE M.  
Address 6710 N. SCOTTSDALE ROAD  
SUITE 250  
City-State-Zip: SCOTTSDALE AZ 85253

Title SRVP & GENERAL COUNSEL  
Name SINQUEFIELD, STEVE  
Address 6710 N. SCOTTSDALE ROAD  
SUITE 250  
City-State-Zip: SCOTTSDALE AZ 85253

Title AUTHORIZED MEMBER  
Name REPAIR CO., INC  
Address 6710 N. SCOTTSDALE ROAD  
SUITE 250  
City-State-Zip: SCOTTSDALE AZ 85253

Title CFO  
Name SCOTT, MICHAEL  
Address 707 FLIGHT ROAD  
City-State-Zip: WINNIPEG R3H 1C6

Title PRESIDENT  
Name STINE, RICK  
Address 6710 N. SCOTTSDALE ROAD  
SUITE 250  
City-State-Zip: SCOTTSDALE AZ 85253

Title VP FINANCE  
Name FAWKES, BRENT  
Address 707 FLIGHT ROAD  
City-State-Zip: WINNIPEG MANITOBA R3H 1C6

*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:** DIANE M.ROSEBOROUGH**SECRETARY****01/24/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date