OAINT I ETERC				
Current Mai	ling Address:			
1959 ARRO\	WHEAD DR NE			
SAINT PETE	RSBURG, FL 33703			
FEI Number	: 82-2440067		Certificate of Status Desir	ed. No
Name and Address of Current Registered Agent:				
	duress of Current Registered Agent.			
MR.				
1840 SW 22ND MIAMI, FL 3314				
MIAMI, FL 3314		stered office or regis	tered agent, or both, in the State of Flor.	ida.
MIAMI, FL 3314	45 US	stered office or regis	tered agent, or both, in the State of Flor	<sup>ida.</sup> 02/26/2024
MIAMI, FL 3314	45 US I entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Flor	
MIAMI, FL 3314 The above named SIGNATURE	45 US I entity submits this statement for the purpose of changing its regis I JACK A. LONETTO	stered office or regis	tered agent, or both, in the State of Flor.	02/26/2024
MIAMI, FL 3314 The above named SIGNATURE	45 US I entity submits this statement for the purpose of changing its regis E: JACK A. LONETTO Electronic Signature of Registered Agent	stered office or regis	tered agent, or both, in the State of Flor	02/26/2024
MIAMI, FL 3314 The above named SIGNATURE Authorized I	<ul> <li>45 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li><u>JACK A. LONETTO</u></li> <li>Electronic Signature of Registered Agent</li> </ul> Person(s) Detail :			02/26/2024
MIAMI, FL 3314 The above named SIGNATURE Authorized I Title	<ul> <li>45 US</li> <li>d entity submits this statement for the purpose of changing its regis</li> <li>E: JACK A. LONETTO</li> <li>Electronic Signature of Registered Agent</li> <li>Person(s) Detail :</li> <li>MGR</li> </ul>	Title	S	02/26/2024

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: SEAN E. KERSTING

MANAGER

02/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

## DOCUMENT# L17000168060

Entity Name: SEK TRANSPORT, LLC

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

1959 ARROWHEAD DR NE SAINT PETERSBURG, FL 33703 FILED Feb 26, 2024 Secretary of State 7937578105CC

Date