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.

MGR

SIGNATURE: PAUL JOHNSON

Electronic Signature of Signing Authorized Person(s) Detail

Current Mailing Address: 4600 ASHTON RD

4600 ASHTON RD SARASOTA, FL 34233 US

DOCUMENT# L17000194494

Current Principal Place of Business:

FEI Number: 82-2714855

Name and Address of Current Registered Agent:

Entity Name: PROFESSIONAL LIFT SOLUTIONS LLC

PJGT INC 4600 ASHTON RD SARASOTA, FL 34233 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:

4600 ASHTON RD SARASOTA, FL 34233

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	JOHNSON, PAUL E	Name	TALKIE, GRANT L
Address	5615 AARON CT	Address	5615 AARON CT
City-State-Zip:	SARASOTA FL 34232	City-State-Zip:	SARASOTA FL 34232

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Jun 09, 2020 Secretary of State 5767872150CC

Certificate of Status Desired: No

Date

06/09/2020 Date