# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L18000012354

Entity Name: ALVOX SOLUTIONS LLC

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

1954 WIND MEADOWS DR BARTOW, FL 33830

## **Current Mailing Address:**

1954 WIND MEADOWS DR BARTOW, FL 33830 US

# FEI Number: 82-5196960

### Name and Address of Current Registered Agent:

BURTS, ANTHONY J 1954 WIND MEADOWS DR BARTOW, FL 33830 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	BURTS, LESLIE S	Name	BURTS, ANTHONY
Address	1954 WIND MEADOWS DR	Address	1954 WIND MEADOWS DR
City-State-Zip:	BARTOW FL 33830	City-State-Zip:	BARTOW FL 33830

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: LESLIE BURTS

MANAGER

04/30/2021 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 30, 2021 Secretary of State 1510843867CC

Certificate of Status Desired: No

Date