FEI Number: 82-5324978			Certificate of Statu
Name and A	Address of Current Registered Agen	t:	
SOWLES, CHA 3930 KENAS S WEST PALM B			
The above name	d entity submits this statement for the purpose of chan	ging its registered office or regis	tered agent, or both, in the St
The above fidilite			
SIGNATURE			
SIGNATURE	E:		
SIGNATURE	Electronic Signature of Registered Agent	Title	AP
SIGNATURE Authorized	Electronic Signature of Registered Agent Person(s) Detail :		AP SOWLES, CHAMEKA
SIGNATURE Authorized Title	Electronic Signature of Registered Agent Person(s) Detail : AMBR	Title	

## Entity Name: SOWLES TRANSPORT LLC **Current Principal Place of Business:**

3930 KENAS ST WEST PALM BEACH, FL 33403

DOCUMENT# L18000095434

## **Current Mailing Address:**

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: ETHAN SOWLES

AMBR

04/15/2021

Date

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## FILED Apr 15, 2021 **Secretary of State** 7502870950CC

us Desired: No

State of Florida.

	Title	AP
	Name	SOWLES, CHAMEKA
	Address	3930 KENAS ST
33403	City-State-Zip:	WEST PALM BEACH FL 33403

Electronic Signature of Signing Authorized Person(s) Detail

Date