| PORT RICHEY, | FL 34668 | | | |
|---|---|-----------------------|---|----------------------|
| Current Mail | ing Address: | | | |
| 11225 AREC PORT RICHI | A DRIVE EY, FL 34668 US | | | |
| FEI Number: 82-5458261 | | | Certificate of Status Desired: No | |
| Name and A | ddress of Current Registered Agent: | | | |
| BRUCE, BASIL 11225 ARECA I PORT RICHEY, | DRIVE | | | |
| The above named | entity submits this statement for the purpose of changing its regis | tered office or regis | tered agent, or both, in the State of Fle | |
| SIGNATURE: BASIL BRUCE | | | | orida. |
| SIGNATURE | BASIL BRUCE | | | orida. 02/24/2023 |
| SIGNATORE | : BASIL BRUCE Electronic Signature of Registered Agent | | | |
| | | | | 02/24/2023 |
| | Electronic Signature of Registered Agent | Title | CFO | 02/24/2023 |
| Authorized I | Electronic Signature of Registered Agent Person(s) Detail : | Title Name | CFO CHARON, EDWIN | 02/24/2023 |
| Authorized I | Electronic Signature of Registered Agent Person(s) Detail : CEO | | | 02/24/2023 |

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: BRUCE, BASIL | CEO | 02/24/2 |
|-------------------------|-----|---------|
|-------------------------|-----|---------|

Electronic Signature of Signing Authorized Person(s) Detail

2023 Date

FILED Feb 24, 2023 **Secretary of State** 1950000870CC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000119456

Entity Name: ELITE ELECTRICAL SOLUTIONZ OF TAMPA BAY, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

11225 ARECA DRIVE

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