

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000195964

**Entity Name:** TOOR DISTRIBUTION LLC

**Current Principal Place of Business:**

719 LORI DRIVE  
PALM SPRING, FL 33461

**Current Mailing Address:**

719 LORI DRIVE  
PALM SPRING, FL 33461 US

**FEI Number:** 83-1586332

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

ATAX ACCOUNTING & FINANCIAL SERVICE  
6470 LAKE WORTH RD  
LAKE WORTH, FL 33463 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

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AMBR
Name	OROZCO, JHEINNY P	Name	OROZCO, ANDRES F
Address	719 LORI DRIVE	Address	719 LORI DRIVE
City-State-Zip:	PALM SPRING FL 33461	City-State-Zip:	PALM SPRING FL 33461

*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:** JHEINNY P OROZCO

MRS

04/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date