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.		

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: JAMES GORDON

SIGNATURE: JAMES GORDON

#### Authorized Person(s) Detail :

Title	AUTHORIZED MEMBER
Name	GORDON, JAMES
Address	1499 WEST PALMETTO PARK ROAD 218
City-State-Zip:	BOCA RATON FL 33486

## 218 BOCA RATON, FL 33486 US

### FEI Number: 83-3892040

### Name and Address of Current Registered Agent:

GORDON, JAMES 1499 WEST PALMETTO PARK ROAD 218 BOCA RATON, FL 33486 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.

2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

# Electronic Signature of Registered Agent

AUTHORIZED MEMBER

03/20/2019

Date

FILED Mar 20, 2019 Secretary of State 5932933957CC

Certificate of Status Desired: No

03/20/2019

Date

## Entity Name: HAWK-EYE PROTECTIVE SERVICES, LLC

DOCUMENT# L18000209103

1499 WEST PALMETTO PARK ROAD

BOCA RATON, FL 33486

**Current Mailing Address:** 

218

**Current Principal Place of Business:** 

1499 WEST PALMETTO PARK ROAD