

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000266405

Entity Name: TRYLOX L.L.C.

Current Principal Place of Business:

402 MAGNOLIA HILL DR
PLANT CITY, FL 33565

Current Mailing Address:

402 MAGNOLIA HILL DR
PLANT CITY, FL 33565 US

FEI Number: 81-4191174

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUSTER, MARK
402 MAGNOLIA HILL DR
PLANT CITY, FL 33565 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
Name KUSTER, MARK
Address 402 MAGNOLIA HILL DR
City-State-Zip: PLANT CITY FL 33565

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: MARK KUSTER

MGR

04/06/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date