# 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: P. NOELLE ROGOVIN

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business:

Entity Name: TROPICAL SOFTWASH LLC

6341 PORTER RD. SUITE #4 SARASOTA, FL 34240

## **Current Mailing Address:**

DOCUMENT# L19000275600

2632 PROUD TRUTH LANE SARASOTA, FL 34240 US

## FEI Number: 84-3722485

### Name and Address of Current Registered Agent:

ROGOVIN, P NOELLE 2632 PROUD TRUTH LANE SARASOTA, FL 34240 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

### Authorized Person(s) Detail :

Title	CFO, AUTHORIZED REPRESENTATIVE	Title	CEO, AUTHORIZED REPRESENTATIVE
Name	ROGOVIN, P NOELLE	Name	ROGOVIN, JOSHUA
Address	2632 PROUD TRUTH LANE	Address	2632 PROUD TRUTH LANE
City-State-Zip:	SARASOTA FL 34240	City-State-Zip:	SARASOTA FL 34240

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED May 01, 2021 Secretary of State 7516724520CC

Date

Certificate of Status Desired: No

Date

05/01/2021

CFO