

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000000675

Entity Name: GEOFACE, LLC**Current Principal Place of Business:**213 HOBBS ST
TAMPA, FL 33619**Current Mailing Address:**213 HOBBS ST
TAMPA, FL 33619**FEI Number:** 84-4168011**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRANTLEY, JUSTIN
213 HOBBS ST
TAMPA, FL 33619 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 | BRANTLEY, JUSTIN |
| Address | 213 HOBBS ST |
| City-State-Zip: | TAMPA FL 33619 |

| | |
|-----------------|----------------|
| Title | MGR |
| Name | HORNE, VERNON |
| Address | 213 HOBBS ST |
| City-State-Zip: | TAMPA FL 33619 |

| | |
|-----------------|----------------|
| Title | MGR |
| Name | BIGGS, FRANK |
| Address | 213 HOBBS ST |
| City-State-Zip: | TAMPA FL 33619 |

| | |
|-----------------|-----------------|
| Title | MGR |
| Name | WILLIAMS, DAVID |
| Address | 213 HOBBS ST |
| City-State-Zip: | TAMPA FL 33619 |

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: VERNON HORNE

MGR

02/18/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date