

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000139668

**Entity Name:** C.P.E. CERTIFIED PROTECTIVE EQUIPMENT , LLC

**Current Principal Place of Business:**

4811 NW 5 ST  
MIAMI, FL 33126

**Current Mailing Address:**

4811 NW 5 ST  
MIAMI, FL 33126

**FEI Number:** 85-1157367

**Certificate of Status Desired:** Yes

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

SANTALLA, ADRIAN  
4811 NW 5 ST  
MIAMI, FL 33126 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 SANTALLA, ADRIAN  
Address 4811 NW 5 ST  
City-State-Zip: MIAMI FL 33126

Title MGR  
Name NGUYEN, DAO  
Address 1080 NW 11 ST # 502  
City-State-Zip: MIAMI FL 33136

*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:** DAO NGUYEN

**MANAGER**

**05/04/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date