# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000219421

Entity Name: NETROLIX, LLC

## **Current Principal Place of Business:**

11161 E. SR 70, STE. 110-572 LAKEWOOD RANCH, FL 34202

## **Current Mailing Address:**

11161 E. SR 70, STE. 110-572 LAKEWOOD RANCH, FL 34202 US

# FEI Number: 47-3791938

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

MORIARTY, BRENDEN S 1001 3RD AVE. W, STE.650 BRADENTON, FL 34205 US

## Certificate of Status Desired: No

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           | AMBR                         | Title           | AMBR                        |
|-----------------|------------------------------|-----------------|-----------------------------|
| Name            | JENSEN, WESLEY H             | Name            | OSAMAH MOHAMMED ALI         |
| Address         | 11161 E. SR 70, STE. 110-572 | Address         | 26718 EAGLE PARK LN.        |
| City-State-Zip: | LAKEWOOD RANCH FL 34202      | City-State-Zip: | KATY TX 77494               |
| Title           | AMBR                         | Title           | AMBR                        |
| Name            | COLLINS, JEFFREY             | Name            | LEE, SIMON                  |
| Address         | 14641 GARFIELD ST.           | Address         | 5970 INDIAN CREEK DR., #PH1 |
|                 |                              |                 |                             |
| City-State-Zip: | BRIGHTON CO 80602            | City-State-Zip: | MIAMI BEACH FL 33140        |
| Title           | AMBR                         |                 |                             |
| Name            | CONNER, CHARLES              |                 |                             |
| Address         | 53 POMPANO ST.               |                 |                             |
| City-State-Zip: | FORT MYERS FL 33931          |                 |                             |

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: WESLEY H. JENSEN

AMBR

03/10/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date

# FILED Mar 10, 2023 Secretary of State 9491969236CC

Date