I hereby certify that the information indicated on this report or supplemental report is true and accur oath; that I am a managing member or manager of the limited liability company or the receiver or tr				
that my name appears above, or on an attachment with all other like empowered.				
SIGNATURE THEODULE MACKENSON	MBR	02/27/2024		

I

Electronic Signature of Signing Authorized Person(s) Detail

# Entity Name: ETHAN'S AUTOMOTIVE SOLUTIONS, LLC

DOCUMENT# L20000303088

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

1325 W. ANDERSON ST ORLANDO, FL 32805

#### **Current Mailing Address:**

1325 W. ANDERSON ST ORLANDO, FL 32805 UN

#### FEI Number: 85-3330562

### Name and Address of Current Registered Agent:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

VITAL, WILL 1325 W. ANDERSON ST ORLANDO, FL 32805 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	: WILL VITAL			02/27/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	THEODULE, MACKENSON	Name	WILL, VITAL	
Address	1803 FIRWOOD CT	Address	1325 W. ANDERSON ST	
City-State-Zip:	ORLANDO FL 32818	City-State-Zip:	ORLANDO FL 32805	

Certificate of Status Desired: No

FILED Feb 27, 2024 Secretary of State 3392568001CC