

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000344743

Entity Name: TRION MASK, LLC

Current Principal Place of Business:

21392 TOWN LAKES DRIVE
APT 1018
BOCA RATON, FL 33486

Current Mailing Address:

21392 TOWN LAKES DRIVE
APT 1018
BOCA RATON, FL 33486 US

FEI Number: 86-1321606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WHITICE, WILLIAM D
15727 PINES BOULEVARD
SUITE 326
PEMBROKE PINES, FL 33027 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 WATERFORD, STEVE
Address 21392 TOWN LAKES DRIVE,
APARTMENT 1018
City-State-Zip: BOCA RATON FL 33486

Title CEO
Name WHITICE, MICHAEL DALE
Address 2900 NW 112 AVENUE
SUITE 10
City-State-Zip: DORAL FL 33172

Title COO
Name GORDON, PETER DALE
Address 2900 NW 112TH AVENUE
SUITE 10
City-State-Zip: DORAL FL 33172

Title LEGAL COUNSEL
Name WHITICE, WILLIAM DALE
Address 720 CYPRESS POINTE DRIVE EAST
City-State-Zip: PEMBROKE PINES FL 33027

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: MICHAEL WHITICE

CEO

03/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date