

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000004085

Entity Name: EKOWIPE HYGIENE AND CLEANING TECHNOLOGIES LLC**Current Principal Place of Business:**6301 NE 4TH AVE
MIAMI, FL 33138**Current Mailing Address:**6301 NE 4TH AVE
MIAMI, FL 33138 US**FEI Number: 86-1480451****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**ACCOUNTING & BUSINESS SERVICES, INC
8200 NE 2ND AVE
STE 1
MIAMI, FL 33138 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 | AMBR |
| Name | ECOSYSTEM INVESTMENT INTERNATIONAL INC |
| Address | 6301 NE 4TH AVE |
| City-State-Zip: | MIAMI FL 33138 |

| | |
|-----------------|--------------------------|
| Title | AMBR |
| Name | ATLANTIC MEDICAL USA LLC |
| Address | 6301 NE 4TH AVE |
| City-State-Zip: | MIAMI FL 33138 |

| | |
|-----------------|---------------------|
| Title | MGR |
| Name | YUZBASIOGLU, GOKHAN |
| Address | 6301 NE 4TH AVE |
| City-State-Zip: | MIAMI FL 33138 |

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: YUZBASIOGLU , GOKHAN**MANAGER****02/10/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date