

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000456331

**Entity Name:** GN USA LLC

**Current Principal Place of Business:**

1117 LOTHIAN DR  
TALLAHASSEE, FL 32312

**Current Mailing Address:**

PO BOX 38031  
TALLAHASSEE, FL 32315 US

**FEI Number:** 87-3188783

**Certificate of Status Desired:** No

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

SAVAGE, RICK  
111 N. CALHOUN ST.  
SUITE 8  
TALLAHASSEE, FL 32301 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 NDOJA, GJERGJ  
Address PO BOX 38031  
City-State-Zip: TALLAHASSEE FL 32315

*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:** GJERGJ NDOJA

**OWNER MANAGER**

**01/25/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date