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.

AMBR

SIGNATURE: HAMON FYTTON

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

Title		MGRM	Title	AMBR	
Nam	ne	FORD, SHARON	Name	FYTTON, HAMON	
Addı	ress	5000 SE 183RD AVENUE, B5	Address	5000 SE 183RD AVENUE, B5	
City-	-State-Zip:	OCKLAWAHA FL 32179	City-State-Zip:	OCKLAWAHA FL 32179	

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.

# 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000254123

## Entity Name: COMPASS INTERNATIONAL STOCK TRANSFER LLC

**Current Principal Place of Business:** 

5000 SE 183RD AVENUE B5 OCKLAWAHA, FL 32179

## **Current Mailing Address:**

PO BOX 690041 VERO BEACH, FL 32969

## FEI Number: 88-2794293

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

FORD, SHARON 5000 SE 183RD AVENUE B4 OCKLAWAHA, FL 32179 US

SIGNATURE:

FILED Apr 28, 2023 Secretary of State 8324571756CC

Certificate of Status Desired: Yes

04/28/2023

Date