

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000520872

Entity Name: EZ SURPLUS RECOVERY "LLC."

Current Principal Place of Business:

100 E. PINE ST STE 110
ORLANDO, FL 32801

Current Mailing Address:

1317 EDGEWATER DR. SUITE 4052
ORLANDO, FL 32804 US

FEI Number: 93-4591804

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GARDNER, GABRIELLE
1317 EDGEWATER DR. SUITE #1020
ORLANDO, FL 32804 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 CROWLEY, HALBERT L
Address 2803 W. ARLINGTON ST. #343
City-State-Zip: ORLANDO FL 32805

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: HALBERT LEON CROWLEY

AMBR

04/05/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date