

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M17000003339

Entity Name: 1ST CHOICE DELIVERY, LLC

Current Principal Place of Business:

9461 DIELMAN ROCK ISLAND INDUSTRIAL DR
ST LOUIS, MO 63132

Current Mailing Address:

9461 DIELMAN ROCK ISLAND INDUSTRIAL DR
ST LOUIS, MO 63132 US

FEI Number: 82-1152068

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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	MANAGER	Title	MANAGER, AUTHORIZED PERSON
Name	HAYMAKER, MARCH	Name	FLEGEL, JASON
Address	9461 DIELMAN ROCK ISLAND INDUSTRIAL DR	Address	9461 DIELMAN ROCK ISLAND INDUSTRIAL DR
City-State-Zip:	ST LOUIS MO 63132	City-State-Zip:	ST LOUIS MO 63132
Title	MANAGER	Title	MANAGER
Name	HONOUR, SCOTT	Name	OFFENHAUSER, PETER
Address	9461 DIELMAN ROCK ISLAND INDUSTRIAL DR	Address	9461 DIELMAN ROCK ISLAND INDUSTRIAL DR
City-State-Zip:	ST LOUIS MO 63132	City-State-Zip:	ST LOUIS MO 63132
Title	MANAGER		
Name	FLEGEL, LESLIE		
Address	9461 DIELMAN ROCK ISLAND INDUSTRIAL DR		
City-State-Zip:	ST LOUIS MO 63132		

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: JASON FLEGEL

MANAGER

02/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date