

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000009353

**Entity Name:** ELECTRICAL AND INSTRUMENTATION UNLIMITED, LLC

**Current Principal Place of Business:**

204 S. BERNARD RD.  
BROUSSARD, LA 70518

**Current Mailing Address:**

204 S. BERNARD RD.  
BROUSSARD, LA 70518 US

**FEI Number: 20-0339670**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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, P  
Name LYON, ROBERT STEVE  
Address 204 S. BERNARD RD.  
City-State-Zip: BROUSSARD LA 70518

Title MGR, VP, S  
Name HAAS, DREW  
Address 800 NICOLLET MALL #1150  
City-State-Zip: MINNEAPOLIS MN 55402

Title MGR, VP  
Name MILLER, F. CLAYTON  
Address 800 NICOLLET MALL #1150  
City-State-Zip: MINNEAPOLIS MN 55402

Title VP  
Name DUPUY, WILLIAM LEROY  
Address 204 S. BERNARD RD.  
City-State-Zip: BROUSSARD LA 70518

Title CONTROLLER  
Name LOWRY, WILLIAM JEFFREY  
Address 204 S. BERNARD RD.  
City-State-Zip: BROUSSARD LA 70518

*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: WILLIAM JEFFREY LOWRY**

**CONTROLLER**

**02/02/2021**

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

\_\_\_\_\_  
Date