### 2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000009774

Entity Name: BRILJENT, LLC

### **Current Principal Place of Business:**

7615 W. JEFFERSON BLVD. FORT WAYNE, FL 46804

# **Current Mailing Address:**

7615 W. JEFFERSON BLVD. FORT WAYNE, IN 46804 US

# FEI Number: 35-2046588

### Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N STE. 300 ST. PETERSBURG, FL 33702 US

Date

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	ODUM, MATTHEW D	Name	WINTERROSE, DOUG
Address	401 N. FRANKLIN ST. STE 3N	Address	401 N. FRANKLIN ST. STE 3N
City-State-Zip:	CHICAGO IL 60654	City-State-Zip:	CHICAGO IL 60654
Title	MGR	Title	MGR
Name	BLAKE, NICK	Name	BRODZELLER, TAMMY
Address	401 N. FRANKLIN ST. STE 3N	Address	7999 KNUE RD. STE 200
City-State-Zip:	CHICAGO IL 60654	City-State-Zip:	INDIANAPOLIS IN 46250
Title	MGR	Title	CONTRACTS ACCOUNTING MANAGER
Name	LORCH, SCOTT	Name	GAST, KIM
Address	7999 KNUE RD. STE 200	Address	7615 W. JEFFERSON BLVD.
City-State-Zip:	INDIANAPOLIS IN 46250	City-State-Zip:	FORT WAYNE FL 46804

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: KIM GAST

CONTRACT ACCOUNTING 02/23/2021 MANAGER

Electronic Signature of Signing Authorized Person(s) Detail