

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000002356

**Entity Name:** CUSTOM ENCLOSURE SOLUTIONS, LLC

**Current Principal Place of Business:**

80 DENT DRIVE NE  
CARTERSVILLE, GA 30121

**Current Mailing Address:**

2160 KINGSTON CT SE  
SUITE I  
MARIETTA, GA 30067 US

**FEI Number:** 27-4804150

**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 MGR  
Name TARACZKOZY, BARRY  
Address 80 DENT DRIVE NE  
City-State-Zip: CARTERSVILLE GA 30121

Title MBR  
Name JOHNSON, WILLIAM B  
Address 2160 KINGSTON CT SE, SUITE:1  
City-State-Zip: MARIETTA GA 30067

Title MBR  
Name JOHNSON JR, GEORGE  
Address 2160 KINGSTON CT SE, SUITE:1  
City-State-Zip: MARIETTA GA 30067

Title AP  
Name MANSUR, SAM  
Address 2160 KINGSTON CT SE, SUITE:1  
City-State-Zip: MARIETTA GA 30067

*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:** GEORGE JOHNSON JR

MEMBER

02/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date