

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000023964

Entity Name: CE POWER SOLUTIONS OF FLORIDA, LLC**Current Principal Place of Business:**3502 RIGA BOULEVARD
SUITE C
TAMPA, FL 33619**Current Mailing Address:**4040 REV DRIVE
CINCINNATI, OH 45232-1914 US**FEI Number:** 52-2377623**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:** JAMES HALPIN

01/21/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	AUTHORIZED REPRESENTATIVE
Name	CE POWER SOLUTIONS, LLC	Name	DAUGHERTY, JERRY S.
Address	4040 REV DRIVE	Address	4040 REV DRIVE
City-State-Zip:	CINCINNATI OH 45232-1914	City-State-Zip:	CINCINNATI OH 45232
Title	VP	Title	SECRETARY
Name	GRANADOS, JOSE	Name	FROST, BECKY
Address	3502 RIGA BOULEVARD SUITE C	Address	4040 REV DRIVE
City-State-Zip:	TAMPA FL 33619	City-State-Zip:	CINCINNATI OH 45232-1914
Title	ASSISTANT SECRETARY	Title	PRESIDENT
Name	SCHULTZ, WILLIAM	Name	MCALISTER, BRENT
Address	411 E. WISCONSIN AVENUE SUITE 2350	Address	2796 CIRCLEPORT DRIVE
City-State-Zip:	MILWAUKEE WI 53202	City-State-Zip:	ERLANGER KY 41018

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: CANDICE MOUNTZ

GENERAL COUNSEL

01/21/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date