

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000056224

Entity Name: EASYSRIPTS, LLC**Current Principal Place of Business:**3250 MARY STREET
#400
COCONUT GROVE, FL 33133**Current Mailing Address:**3250 MARY STREET
#400
COCONUT GROVE, FL 33133 US**FEI Number:** 30-0478573**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE STREET
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:** RON SCHUTZEN

05/04/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name HIGHLAND ACQUISITION HOLDINGS, LLC
Address 3250 MARY STREET #400
City-State-Zip: COCONUT GROVE FL 33133

Title TREASURER
Name SCHER, VINCENT E.
Address 220 VIRGINIA AVENUE
City-State-Zip: INDIANAPOLIS IN 46204

Title PRESIDENT
Name OROZCO, TOMAS IGNACIO
Address 9250 W FLAGLER STREET
City-State-Zip: MIAMI FL 33174

Title SECRETARY
Name KIEFER, KATHLEEN S.
Address 220 VIRGINIA AVENUE
City-State-Zip: INDIANAPOLIS IN 46204

Title ASSISTANT TREASURER
Name NOBLE, ERIC K
Address 220 VIRGINIA AVENUE
City-State-Zip: INDIANAPOLIS IN 46204

Title VP
Name ROBERTS, SUZANNA BELL
Address 4200 W. CYPRESS STREET
City-State-Zip: TAMPA FL 33607

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: KATHLEEN S. KIEFER**SECRETARY**

05/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date