

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000043477

**Entity Name:** CHAIN RING BICYCLES, LLC

**Current Principal Place of Business:**

3409 W UNIVERSITY AVE  
GAINESVILLE, FL 32607

**Current Mailing Address:**

3409 W UNIVERSITY AVE  
GAINESVILLE, FL 32607 US

**FEI Number:** 27-2416671

**Certificate of Status Desired:** No

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

FAUST, RALEIGH  
3409 W UNIVERSITY AVE  
GAINESVILLE, FL 32607 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:** RALEIGH FAUST

03/16/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FAUST, RALEIGH  
Address 3409 W UNIVERSITY AVE  
City-State-Zip: GAINESVILLE FL 32607

*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:** RALEIGH FAUST

MGR

03/16/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date