

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000113531

**Entity Name:** SOUTH TAMPA LOGISTICS, LLC

**Current Principal Place of Business:**

4030 HENDERSON BLVD  
TAMPA, FL 33629

**Current Mailing Address:**

4030 HENDERSON BLVD  
TAMPA, FL 33629 US

**FEI Number:** 27-3813875

**Certificate of Status Desired:** No

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

SIMPLIFI BUSINESS, INC.  
4030 HENDERSON BLVD  
TAMPA, FL 33629 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 CEO, CHAIRMAN  
Name WILLS, WILLIAM R III  
Address 4030 HENDERSON BLVD  
City-State-Zip: TAMPA FL 33629

Title MANAGER  
Name WILLS, WILLIAM COHEN  
Address 4030 HENDERSON BLVD  
City-State-Zip: TAMPA FL 33629

Title SECRETARY  
Name WILLS, CINDY MIXON  
Address 4030 HENDESON BLVD  
City-State-Zip: TAMPA FL 33629

Title MANAGER  
Name ROBEY, MICHAEL J  
Address 4030 HENDERSON BLVD  
City-State-Zip: TAMPA FL 33629

*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:** WILLIAM R WILLS

**CHIEF MANAGER**

**02/09/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date