that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY GAINEY

Electronic Signature of Signing Authorized Person(s) Detail

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

Title	MGRM	Title	MGRM
Name	BALAREZO, CHRISTOPHER	Name	GAINEY, JEFFREY
Address	224 UPMINSTER M	Address	12350 N.W. 29TH MANOR
City-State-Zip:	DEERFIELD BEACH FL 33442	City-State-Zip:	SUNRISE FL 33323

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000001728

Entity Name: FLEETWORX TRUCK AND AUTO REPAIR, LLC

Current Principal Place of Business:

441 SOUTH DIXIE HWY EAST POMPANO BEACH. FL 33060

Current Mailing Address:

441 SOUTH DIXIE HWY EAST POMPANO BEACH. FL 33060

FEI Number: 27-4496751

Name and Address of Current Registered Agent:

ZIMMERMAN, STEPHEN L 737 EAST ATLANTIC BLVD. POMPANO BEACH, FL 33060 US

Authorized Person(s) Detail :

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

OFFICER

04/11/2017

FILED Apr 11, 2017 Secretary of State CC0218745461

Date

Certificate of Status Desired: No

Date