#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130499

Entity Name: KAIRON LLC

**FILED** Feb 17, 2020 **Secretary of State** 0246838868CC

### **Current Principal Place of Business:**

2981 FORD STREET EXTENSION #247

247

OGDENSBURG, NY 13669

### **Current Mailing Address:**

2981 FORD STREET EXTENSION #247

OGDENSBURG, NY 13669 US

FEI Number: 45-3857834 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

INCORPORATING SERVICES LTD 1540 GLENWAY DRIVE TALLAHASSEE, FL 32301 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 **MGRM** Title **MGRM** 

DHILLON, NAVDEEP DHILLON, HARLEEN Name Name

Address 2981 FORD STREET EXTENSION #247 Address 2981 FORD STREET EXTENSION #247 247

247

OGDENSBURG NY 13669 OGDENSBURG NY 13669 City-State-Zip: City-State-Zip:

Title **MGRM** Title **MGRM** 

DHILLON, KOUNVER DHILLON, KARRAN Name Name

2981 FORD STREET EXTENSION #247 2981 FORD STREET EXTENSION #247 Address Address 247 247

OGDENSBURG NY 13669 City-State-Zip: OGDENSBURG NY 13669 City-State-Zip:

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.