

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000017969

Entity Name: POLONIOUS INVESTIGATION MANAGEMENT SYSTEMS, LLC**Current Principal Place of Business:**228 E. 45TH ST. STE. 9E
NEW YORK, NY 10017**Current Mailing Address:**228 E. 45TH ST. STE. 9E
NEW YORK, NY 10017 US**FEI Number:** 98-0595181**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N STE 300,
ST. PETERSBURG, FL 33702 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:** TOM GLOVER

04/25/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	PRESIDENT
Name	MORRENHOF, MARINUS JEROEN
Address	228 E. 45TH ST. STE. 9E
City-State-Zip:	NEW YORK NY 10017

Title	TREASURER
Name	VAN LEEUWEN, CHRISTIAN
Address	228 E. 45TH ST. STE. 9E
City-State-Zip:	NEW YORK NY 10017

Title	SECRETARY
Name	WILLEMSSEN, JACOB
Address	228 E. 45TH ST. STE. 9E
City-State-Zip:	NEW YORK NY 10017

Title	ASST. SECRETARY
Name	MARSH, KIRKE
Address	228 E. 45TH ST. STE. 9E
City-State-Zip:	NEW YORK NY 10017

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: KIRKE MARSH

ASST SEC

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date