

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000091106

Entity Name: XPRESS RETAIL LLC

Current Principal Place of Business:

7750 OKEECHOBEE BLVD
STE 4-425
WEST PALM BEACH, FL 33411

Current Mailing Address:

7750 OKEECHOBEE BLVD
STE. 4-425
WEST PALM BEACH, FL 33411 US

FEI Number: 27-2896867

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MGR, CEO
Name DAHLGREN, BRUCE
Address 7750 OKEECHOBEE BLVD
STE 4-425
City-State-Zip: WEST PALM BEACH FL 33411

Title EVP
Name LEWIS, JASON
Address 550 S DIXIE HIGHWAY
STE 300
City-State-Zip: CORAL GABLES FL 33146

Title MGR, CHAIRMAN
Name ELIAS, JON E
Address 550 S DIXIE HIGHWAY
STE 300
City-State-Zip: CORAL GABLES FL 33146

Title MGR, SECRETARY
Name GERSHMAN, DAVID
Address 550 SOUTH DIXIE HIGHWAY
STE 300
City-State-Zip: CORAL GABLES FL 33146

Title MGR, EVP
Name TEMPLETON, TROY D
Address 550 S DIXIE HWY
STE 300
City-State-Zip: CORAL GABLES FL 33146

Title EVP
Name JERLES, TODD V
Address 550 S DIXIE HWY
STE 300
City-State-Zip: CORAL GABLES FL 33146

Title AUTHORIZED MEMBER
Name XPRESS KIOSK HOLDING
CORPORATION
Address 550 S. DIXIE HWY #300
City-State-Zip: CORAL GABLES FL 33146

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: DAVID GERSHMAN

SECRETARY

03/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date