# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L13000113396

Entity Name: SBTS, LLC

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

C/O JAMES D MAGARIAN 1 SUNSET DRIVE PEABODY, MA 01960-6609

# **Current Mailing Address:**

C/O JAMES D MAGARIAN 1 SUNSET DRIVE PEABODY, MA 01960-6609

## FEI Number: 46-3495838

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

# Authorized Person(s) Detail :

 
 Title
 PARTNER

 Name
 MAGARIAN, JAMES D

 Address
 C/O JAMES D MAGARIAN 1 SUNSET DRIVE

 City-State-Zip:
 PEABODY MA 01960-6609

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.

PARTNER

SIGNATURE: JAMES D MAGARIAN

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

03/16/2021 Date