

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000095042

Entity Name: ALOGISTICS LLC**Current Principal Place of Business:**1701 MEETING PLACE, # 203
ORLANDO, FL 32814**Current Mailing Address:**P.O BOX 621956
ORLANDO, FL 32862 US**FEI Number:** 36-4788035**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GONZALEZ ABREU, EVELYN
8317 KELSALL DR.
ORLANDO, FL 32832 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
Name	MARTELL RAMIREZ, LARRY EDUARDO
Address	1701 MEETING PLACE, # 203
City-State-Zip:	ORLANDO FL 32814

Title	MGRM
Name	DAVILA RISSO, MARIA DE LOURDES
Address	1701 MEETING PLACE, # 203
City-State-Zip:	ORLANDO FL 32814

Title	MGRM
Name	GONZALEZ ABREU, EVELYN
Address	8317 KELSALL DR.
City-State-Zip:	ORLANDO FL 32832

Title	MGRM
Name	GONZALEZ BECERRA, PEDRO RAFAEL
Address	8317 KELSALL DR.
City-State-Zip:	ORLANDO FL 32832

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: GONZALEZ BECERRA PEDRO RAFAEL

MGRM

04/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date