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.

AMBR

SIGNATURE: CHRISTINA SLATE

Electronic Signature of Signing Authorized Person(s) Detail

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	AMBR	Title	AMBR
Name	SLATE, CHRISTINA M	Name	SLATE, WILLIAM D
Address	7790 INDUSTRIAL ROAD	Address	7790 INDUSTRIAL ROAD
City-State-Zip:	WEST MELBOURNE FL 32904	City-State-Zip:	WEST MELBOURNE FL 32904

# WEST MELBOURNE, FL 32904

DOCUMENT# L14000100005

### **Current Mailing Address:**

7790 INDUSTRIAL ROAD

7790 INDUSTRIAL ROAD WEST MELBOURNE, FL 32904 US

**Current Principal Place of Business:** 

### FEI Number: 47-1174050

## Name and Address of Current Registered Agent:

Entity Name: SLATE PROPERTY MANAGEMENT, LLC.

SLATE, CHRISTINA M 7790 INDUSTRIAL ROAD WEST MELBOURNE, FL 32904 US

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### FILED Jan 18, 2021 Secretary of State 2490627647CC

Date

Certificate of Status Desired: Yes

01/18/2021

Date