

2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000029891

Entity Name: FLEX 365 LLC**Current Principal Place of Business:**1049 EBER BLVD
SUITE 108
MELBOURNE, FL 32904**Current Mailing Address:**1049 EBER BLVD
SUITE 108
MELBOURNE, FL 32904 US**FEI Number:** 47-2922082**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**FISHER, JULIE V
1661 WILLARD ROAD NW
PALM BAY, FL 32907 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:** JULIE V FISHER

10/10/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :Title MGR
Name FISHER, JULIE V
Address 1661 WILLARD ROAD NW
City-State-Zip: PALM BAY FL 32907Title MGR
Name FISHER, KEVIN L
Address 1661 WILLARD ROAD NW
City-State-Zip: PALM BAY FL 32907Title MGR
Name FISHER, AMBER G
Address 1661 WILLARD ROAD NW
City-State-Zip: PALM BAY FL 32904Title MANAGER
Name FISHER, EMMA KAITLYN
Address 1661 WILLARD ROAD NW
City-State-Zip: PALM BAY FL 32907Title MANAGER
Name FISHER, AUSTIN LOUIS
Address 1661 WILLARD ROAD NW
City-State-Zip: PALM BAY FL 32907

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: JULIE V FISHER**DIRECTOR**

10/10/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date