

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000131769

Entity Name: SUNRISE ADAPTIVE SOLUTIONS, LLC

Current Principal Place of Business:

8133 SYCAMORE DR
NEW PORT RICHEY, FL 34654

Current Mailing Address:

8133 SYCAMORE DR
NEW PORT RICHEY, FL 34654

FEI Number: 82-1941041

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARNELL, STEVEN K
8133 SYCAMORE DR
NEW PORT RICHEY, FL 34654 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
Name PARNELL, STEVEN K
Address 8133 SYCAMORE DR
City-State-Zip: NEW PORT RICHEY FL 34654

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: STEVEN PARNELL

OWNER

01/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date