#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000262112

Entity Name: TOMAS LOPEZ AUTHERIZED DEALER L.L.C.

FILED Mar 19, 2020 Secretary of State 4778329641CC

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

5510 KELLY RD

PLANT CITY, FL 33565

### **Current Mailing Address:**

5510 KELLY RD

PLANT CITY. FL 33565 US

FEI Number: 82-3976768 Certificate of Status Desired: No

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

LOPEZ, TOMAS 5510 KELLY RD

PLANT CITY, FL 33565 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 AMBR

BR Title AMBR

Name LOPEZ, TOMAS F Address 5510 KELLY RD Name LOPEZ, TOMAS J Address 5510 KELLY RD

City-State-Zip: PLANT CITY FL 33565

City-State-Zip: PLANT CITY FL 33565

Title AMBR

Name LOPEZ, OLGA LIDID

Address 5510 KELLY RD

City-State-Zip: PLANT CITY FL 33565

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: TOMAS LOPEZ

Electronic Signature of Signing Authorized Person(s) Detail

PRESIDENT

03/19/2020

Date