

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000053748

Entity Name: IDEAL ENERGY FLOWS, LLC**Current Principal Place of Business:**1805 MAGNOLIA DR
CLEARWATER, FL 33764**Current Mailing Address:**1805 MAGNOLIA DR
CLEARWATER, FL 33764 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**OSBORN, EMMETT
215 SARASOTA RD
BELLEAIR, FL 33756 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:** EMMETT OSBORN

02/21/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name OSBORN, EMMETT MR.
Address 215 SARASOTA ROAD
City-State-Zip: BELLEAIR FL 33765

Title MANAGING MEMBER
Name DEMOTTS, ROBERT MR.
Address 500 OSCEOLA N. #607
City-State-Zip: CLEARWATER FL 33755

Title MANAGING MEMBER
Name CHALUPSKY, PAUL
Address 628 CLEVELAND ST
APT 1213
City-State-Zip: CLEARWATER FL 33755

Title MANAGING MEMBER
Name MIANI, JOHN
Address 2904 CHANCERY LN
City-State-Zip: CLEARWATER FL 33759

Title MANAGING MEMBER
Name D'AGOSTINI, ANDREA
Address 628 CLEVELAND ST
1211
City-State-Zip: CLEARWATER FL 33755

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: PAUL CHALUPSKY

MANAGING MEMBER

02/21/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date