

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000121238

Entity Name: LOWEGISTICS LLC

Current Principal Place of Business:

9 PINE RIDGE DR.
MATTAPOISETT, MA 02739

Current Mailing Address:

9 PINE RIDGE DR.
MATTAPOISETT, MA 02739 US

FEI Number: 83-0631527

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
476 RIVERSIDE AVE.
JACKSONVILLE, FL 32202 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
Name LOWE, SHENA
Address 9 PINE RIDGE DR.
City-State-Zip: MATTAPOISETT MA 02739

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: SHENA LOWE

AMBR

01/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date