Authorized Person(s) Detail :

Electronic Signature of Registered Agent

Title	MGR	Title	AUTHORIZED MEMBER
Name	AYVAZ, ECEM	Name	SATIROGLU, ALI
Address	1109 E. BROWARD BLVD., #12	Address	4970 SW 52ND ST 323
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	DAVIE FL 33314

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.

Current Mailing Address:

4980 SW 52ND STREET

FEI Number: 32-0579623

SIGNATURE: ALI SATIROGLU

Name and Address of Current Registered Agent:

SATIROGLU, ALI 4980 SW 52ND STREET #101 DAVIE, FL 33314 US

DOCUMENT# L18000219964

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: SURPLUS EQUIPMENT PARTS, LLC

Current Principal Place of Business:

4980 SW 52ND STREET #101 DAVIE, FL 33314

#101 DAVIE, FL 33314 US

Certificate of Status Desired: No

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. MANAGER / PARTNER

SIGNATURE: ALI SATIROGLU

Electronic Signature of Signing Authorized Person(s) Detail

01/30/2025

Date

01/30/2025