

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000002758

Entity Name: DORESTIN LOGISTIC, LLC**Current Principal Place of Business:**4318 SW YAMADA DRIVE
FORT SAINT LUCIE, FL 34953**Current Mailing Address:**4318 SW YAMADA DRIVE
FORT SAINT LUCIE, FL 34953**FEI Number:** 83-2805918**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GALAXY UNIVERSAL SERVICES, INC.
750 S ORANGE BLOSSOM TRL
215
ORLANDO, FL 32805 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:** MAX D NOELMA

03/20/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|---------------------------|
| Title | PRESIDENT |
| Name | DORISTIN, YLBERT |
| Address | 4318 SW YAMADA DRIVE |
| City-State-Zip: | FORT SAINT LUCIE FL 34953 |

| | |
|-----------------|---------------------------|
| Title | VP |
| Name | DORISTIN, GUITON |
| Address | 4318 SW YAMADA DRIVE |
| City-State-Zip: | FORT SAINT LUCIE FL 34953 |

| | |
|-----------------|------------------------------------|
| Title | AUTHORIZED REPRESENTATIVE |
| Name | DORISTIN, CAMELITA |
| Address | 3101 NW 47TH TERRACE BLDG 4 131 |
| City-State-Zip: | LAUDERDALE LAKES FL 33309 |

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: YLBERT DORISTIN

PRESIDENT

03/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date