

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000196424

Entity Name: N&C CHEMICAL SUPPLIES AND LOGISTICS LLC**Current Principal Place of Business:**3020 NW 125 AVE
APT 310
SUNRISE, FL 33323**Current Mailing Address:**3020 NW 125 AVE
APT 310
SUNRISE, FL 33323 US**FEI Number:** 86-3770770**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LAM ACCOUNTING SERVICES CORP.
3020 NW 125 AVE
APT 310
SUNRISE, FL 33323 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	S
Name	CADENA HOYOS, ADRIANA
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

Title	T
Name	NUSTES, NICOLAS
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

Title	MGRM
Name	CADENA HOYOS, ADRIANA
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

Title	P
Name	NUSTES RINCON, CARLOS ANDRES
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

Title	MGRM
Name	NUSTES RINCON, CARLOS ANDRES
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

Title	MGRM
Name	NUSTES, NICOLAS
Address	3020 NW 125 AVE APT 310
City-State-Zip:	SUNRISE FL 33323

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: CARLOS ANDRES NUSTES RINCON

MGRM

04/19/2023

Electronic Signature of Signing Authorized Person(s) Detail_____
Date