

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000330135

**Entity Name:** AMKRUN LOGISTICS LLC

**Current Principal Place of Business:**

3101 SW 34TH AVE  
905 291  
OCALA, FL 34474

**Current Mailing Address:**

P.O BOX 540467  
OPALOCKA, FL 33054 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROUSSARD, CHANIVIA S  
13345 NW 17TH CT  
MIAMI, FL 33167 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:** CHANIVIA S BROUSSARD

01/24/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name BROUSSARD, CHANIVIA S  
Address 13345 NW 17TH CT  
City-State-Zip: MIAMI FL 33167

Title AUTHORIZED MEMBER  
Name CAREY, FRED  
Address 1881 NW 207TH STREET  
210  
City-State-Zip: MIAMI GARDENS FL 33056

Title AUTHORIZED MEMBER  
Name CHARLTON, KANAYA K  
Address 422 CONNELL RD  
D3  
City-State-Zip: VALDOSTA GA 31602

*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:** CHANIVIA BROUSSARD

REGISTER AGENT

01/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date