# 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

SIGNATURE: NICHOLAS J KLEPPIN

Electronic Signature of Signing Authorized Person(s) Detail

9245 NE JACKSONVILLE ROAD ANTHONY. FL 32617 US

# FEI Number: 88-2212032

**Current Mailing Address:** 

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

KLEPPIN, NICHOLAS J 9513 NE 100TH ST. FORT MCCOY, FL 32134 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

Title	MGR	Title	AP
Name	KLEPPIN, NICHOLAS J	Name	VANDERBERG, ASHLEY L
Address	9513 NE 100TH ST	Address	9513 NE 100TH ST.
City-State-Zip:	FORT MCCOY FL 32134	City-State-Zip:	FORT MCCOY FL 32134

that my name appears above, or on an attachment with all other like empowered.

Certificate of Status Desired: No

FILED Jan 16, 2024 Secretary of State 7001595253CC

Date

01/16/2024

**OWNER/MGR** 

Date

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L22000217115

Entity Name: KLEPPIN'S TRUCK & TRAILER REPAIR, LLC

## **Current Principal Place of Business:**

9245 NE JACKSONVILLE ROAD ANTHONY, FL 32617