

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000301552

**Entity Name:** TC LOGISTIX LLC**Current Principal Place of Business:**2980 MCFARLANE RD  
MIAMI, FL 33133**Current Mailing Address:**2980 MCFARLANE RD  
MIAMI, FL 33133 US**FEI Number:** 88-3184434**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JC BUSINESS SOLUTIONS INC  
7500 NW 25TH ST SUITE 237  
DORAL, FL 33122 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 MGR  
Name DAVID RUIZ VELA  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title AMBR  
Name INVERSIONES COSTA NORTE SAS  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title AMBR  
Name INVERSIONES SCHOTT CONVO SAS  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title AMBR  
Name INVERSIONES TORREZAM S. EN C.  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title AMBR  
Name VEBE, SAS  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title AMBR  
Name CORINCHE EXPRESS SERVICES SAS  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

Title MGRM  
Name AMAURY E. COVO TORRES  
Address 2980 MCFARLANE RD  
City-State-Zip: MIAMI FL 33133

*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:** DAVID RUIZ VELA

MANAGER

01/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date