

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L24000054733

**Entity Name:** CHAIN MOUNTAIN LLC

**Current Principal Place of Business:**

1600 E 8TH AVE  
TAMPA, FL 33605

**Current Mailing Address:**

1600 E 8TH AVE  
TAMPA, FL 33605 US

**FEI Number:** 99-1130030

**Certificate of Status Desired:** No

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

CHEEK, MATT  
1600 E 8TH AVE  
TAMPA, FL 33605 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:** MATT CHEEK

02/11/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name ECOLOGIX SCM LLC  
Address 1600 E 8TH AVE  
City-State-Zip: TAMPA FL 33605

Title AMBR  
Name ILLUMAN CAPITAL LLC  
Address 2349 W AUTUMN FARM DRIVE  
City-State-Zip: SOUTH JORDAN UT 84095

Title AMBR  
Name TARSTECH LLC  
Address 2458 SANDBURG STREET  
City-State-Zip: DUN LORING VA 22027

Title AMBR  
Name WEME LLC  
Address 111 92ND AVE NE  
City-State-Zip: ST PETERSBURG FL 33702

*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:** MATT CHEEK

**PARTNER**

02/11/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date