

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000000862

Entity Name: MARTINEZ COUCH & ASSOCIATES, LLC**Current Principal Place of Business:**1084 CROMWELL AVE
ROCKY HILL, CT 06067**Current Mailing Address:**1084 CROMWELL AVE
STE A-2
ROCKY HILL, CT 06067 US**FEI Number:** 06-1554807**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:** ERIKA CURRY, ASST VP

04/26/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

| | |
|-----------------|------------------------------|
| Title | MBR |
| Name | COUCH, RICHARD |
| Address | 1084 CROMWELL AVE STE A-2 |
| City-State-Zip: | ROCKY HILL CT 06067 |

| | |
|-----------------|------------------------------|
| Title | MANAGING MEMBER |
| Name | MARTINEZ, ANGEL RAFAEL |
| Address | 1084 CROMWELL AVE STE A-2 |
| City-State-Zip: | ROCKY HILL CT 06067 |

| | |
|-----------------|------------------------------|
| Title | FINANCE MANAGER |
| Name | KELLEMS , KAREN |
| Address | 1084 CROMWELL AVE STE A-2 |
| City-State-Zip: | ROCKY HILL CT 06067 |

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: KAREN M KELLEMS

FINANCE MANAGER

04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date