

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000002691

**Entity Name:** UNITERS HOLDINGS, LLC

**Current Principal Place of Business:**

1700 PALM BEACH LAKES BLVD STE 1100  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

1700 PALM BEACH LAKES BLVD STE 1100  
WEST PALM BEACH, FL 33401

**FEI Number:** 80-0710743

**Certificate of Status Desired:** No

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

GY CORPORATE SERVICES, INC.  
777 S. FLAGLER DR  
STE 500E  
WEST PALM BEACH, FL 33401 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:** WILLIAM HYLAND

02/08/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	CEO	Title	EVP & CHIEF FINANCIAL OFFICER
Name	TORK, GORDIAN	Name	COHEN, JEFFREY
Address	1700 PALM BEACH LAKES BLVD STE 1100	Address	1700 PALM BEACH LAKES BLVD STE 1100
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	EVP - GLOBAL SUPPLY CHAIN MANAGEMENT	Title	EVP AND CHIEF ADMINISTRATIVE OFFICER
Name	BONVOULOIR, CLAUDE	Name	WYSONG, DEREK
Address	1700 PALM BEACH LAKES BLVD STE 1100	Address	1700 PALM BEACH LAKES BLVD STE 1100
City-State-Zip:	WEST PALM BEACH FL 33401	City-State-Zip:	WEST PALM BEACH FL 33401
Title	EVP - GLOBAL PRODUCT MANAGEMENT		
Name	FOLKERTS, REX		
Address	1700 PALM BEACH LAKES BLVD STE 1100		
City-State-Zip:	WEST PALM BEACH FL 33401		

*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:** TORK , GORDIAN

CEO

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date