2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2018
Secretary of State
CC9679235218

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Entity Name: COASTAL SLIP FORM LLC

Current Principal Place of Business:

9408 BELLINGRATH ROAD
THEODORE, AL 36582

Current Mailing Address:

PO BOX 1409
THEODORE, AL 36590 US

FEI Number: 61-1789257

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	P
Name	MCELHENNEY, JOSH
Address	9408 BELLINGRAPH ROAD
City-State-Zip:	THEODORE AL 36582

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: JOSH MCELHENNEY MEMBER 01/18/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date