

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000007572

Entity Name: HBARSCI LLC**Current Principal Place of Business:**788 OLD DUTCH RD
VICTOR, NY 14564**Current Mailing Address:**788 OLD DUTCH RD
VICTOR, NY 14564 US**FEI Number:** 46-0852072**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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MEMBER
Name PEARSON, DOUGLAS
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

Title MEMBER
Name JAIN, SUMIT
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

Title MEMBER
Name WINK, MICHAEL
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

Title MEMBER
Name BERTRAND, MATTHEW
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

Title MEMBER
Name PEARSON, BENJAMIN
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

Title CFO
Name WEINER, ROBERT
Address 788 OLD DUTCH RD
City-State-Zip: VICTOR NY 14564

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: ROBERT WEINER**CHIEF FINANCIAL
OFFICER****02/02/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date