

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000007203

Entity Name: UNCLE RAYS, LLC

Current Principal Place of Business:

502 S GAY STREET
KNOXVILLE, TN 37902

Current Mailing Address:

PO BOX 238
KNOXVILLE, TN 37901-0238 US

FEI Number: 20-4630948

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MBR
Name THE H.T. HACKNEY CO.
Address 502 S. GAY STREET
City-State-Zip: KNOXVILLE TN 37902

Title PCEO
Name SAMSOM, WILLIAM B
Address 2153 DUNCAN ROAD
City-State-Zip: KNOXVILLE TN 37919

Title VPT
Name MORTON, MICHAEL D
Address 6416 SHERWOOD DRIVE
City-State-Zip: KNOXVILLE TN 37919

Title S
Name MORTON, DENA G
Address 6416 SHERWOOD DRIVE
City-State-Zip: KNOXVILLE TN 37919

Title CFO
Name MORTON, MICHAEL D
Address 502 S GAY STREET
City-State-Zip: KNOXVILLE TN 37902

Title VP
Name MORTON, MICHAEL D
Address 502 S GAY STREET
City-State-Zip: KNOXVILLE TN 37902

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: THE HT HACKNEY CO, DIANNIA BALES

MANAGER

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date