| I hereby certify that the information indicated on this report or supplemental report is true and accurat   |      |            |  |  |
|---|------|------------|--|--|
| 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: AARON REMALEY  | AMBR | 03/09/2022 |  |  |

| Title           | AMBR               | Title           | AMBR                  |
|-----------------|--------------------|-----------------|-----------------------|
| Name            | REMALEY, AARON     | Name            | LUCENT, JOSEPH JR     |
| Address         | 13415 LYNNETREE LN | Address         | 462 MAGNOLIA ST       |
| City-State-Zip: | RIVERVIEW FL 33579 | City-State-Zip: | ORMOND BEACH FL 32176 |
|                 |                    |                 |                       |

| Authorized Person(s) Detail : |                    |                 |                       |  |
|-------------------------------|--------------------|-----------------|-----------------------|--|
| Title                         | AMBR               | Title           | AMBR                  |  |
| Name                          | REMALEY, AARON     | Name            | LUCENT, JOSEPH JR     |  |
| Address                       | 13415 LYNNETREE LN | Address         | 462 MAGNOLIA ST       |  |
| City-State-Zip:               | RIVERVIEW FL 33579 | City-State-Zip: | ORMOND BEACH FL 32176 |  |

13415 LYNTREE LN RIVERVIEW, FL 33579

DOCUMENT# L21000074415

13415 LYNTREE LN RIVERVIEW, FL 33579

**Current Mailing Address:** 

# FEI Number: 86-1776116

# Name and Address of Current Registered Agent:

REMALEY, AARON 13415 LYNNETREE LN RIVERVIEW, FL 33579 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:

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: TOP OF THE LINE MOTORS AND TRANSMISSIONS LLC

**Current Principal Place of Business:** 

Electronic Signature of Registered Agent

Date

Certificate of Status Desired: Yes

FILED Mar 09, 2022 Secretary of State 0581489801CC

Electronic Signature of Signing Authorized Person(s) Detail