

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000000760

Entity Name: SOLUTIONS FOR INDEPENDENT & LEASED OPERATORS, LLC

Current Principal Place of Business:

1235 EAST BLVD
SUITE E #494
CHARLOTTE, NC 28203

Current Mailing Address:

1000 N WEST STREET
SUITE 194
WILIMINGTON, DE 19801 US

FEI Number: 37-1951966

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E GAINS ST
TALLAHASSEE, FL 32399 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 PRESIDENT
Name SHARPE, ANDREW CAIN
Address 1235 EAST BLVD
 SUITE E #494
City-State-Zip: CHARLOTTE NC 28203

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: SHARPE, ANDREW CAIN

MANAGER

02/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date