

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

Payment To:	Amount:
Account:	Description:
FILED	
Jan 22, 2008 08:00 AM	
Secretary of State	
Approval:	

DOCUMENT # M03000004336

1. Entity Name
SSGP HOLDINGS, LLC



Principal Place of Business
841 PRUDENTIAL DRIVE, SUITE 1300
JACKSONVILLE, FL 32207

Mailing Address
841 PRUDENTIAL DRIVE, SUITE 1300
JACKSONVILLE, FL 32207

DO NOT WRITE IN THIS SPACE



01092008No Chg-LLC

CR2E083 (12/07)

4. FEI Number
20-0511087

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

DODT, HAROLD
841 PRUDENTIAL DRIVE
SUITE 1300
JACKSONVILLE, FL 32207

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000791346
01/23/08-80072-006 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
KDD HOLDINGS, LLC
841 PRUDENTIAL DR. STE 1300
JACKSONVILLE, FL 32207

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #