

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000063538

Entity Name: JERRY VALENTE, PH.D., J.D., M.B.A., PLC

Current Principal Place of Business:

6015 CHESTER CIRCLE
SUITE 212
JACKSONVILLE, FL 32217

Current Mailing Address:

6015 CHESTER CIRCLE
SUITE 212
JACKSONVILLE, FL 32217

FEI Number: 20-1480813

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VALENTE, JERRY R
6015 CHESTER CIRCLE
SUITE 212
JACKSONVILLE, FL 32217 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 MGR
Name VALENTE, JERRY R
Address 6015 CHESTER CIRCLE
City-State-Zip: JACKSONVILLE FL 32217

Title AUTHORIZED REPRESENTATIVE
Name VALENTE, TRACY LYNN
Address 6015 CHESTER CIRCLE
SUITE 212
City-State-Zip: JACKSONVILLE FL 32217

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: JERRY VALENTE

OWNER

01/19/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date