

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000117838

**Entity Name:** JML HOLDINGS, LLC**Current Principal Place of Business:**202 SOUTH MAGNOLIA AVENUE  
SUITE 1  
OCALA, FL 34471**Current Mailing Address:**P.O. BOX 4560  
OCALA, FL 34478 US**FEI Number:** 20-3917481**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAMPO, AARON  
202 S. MAGNOLIA AVE.  
SUITE 1  
OCALA, FL 34471 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:** AARON CAMPO

04/26/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	SORRENTINO, JOSEPH A
Address	202 S. MAGNOLIA AVE, SUITE 1
City-State-Zip:	OCALA FL 34471

Title	MGRM
Name	STANDLEY, MARY C
Address	202 S. MAGNOLIA AVE, SUITE 1
City-State-Zip:	OCALA FL 34471

Title	MGRM
Name	CRAGGS, LYNN M
Address	202 S. MAGNOLIA AVE, SUITE 1
City-State-Zip:	OCALA FL 34471

Title	AUTHORIZED REPRESENTATIVE
Name	CAMPO, AARON J
Address	202 S. MAGNOLIA AVE, SUITE 1
City-State-Zip:	OCALA FL 34471

*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:** AARON CAMPO**AUTHORIZED  
REPRESENTATIVE**

04/26/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date