

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000044448

Entity Name: SV2, LLC

Current Principal Place of Business:

8110 S.W. 43RD PLACE
GAINESVILLE, FL 32608

Current Mailing Address:

13522 NW 9TH ROAD
NEWBERRY, FL 32669 US

FEI Number: 20-4775689

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOVAY, COOK & OSSI, P.A.
901 N.W. 57TH STREET
GAINESVILLE, FL 32605 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 FOSTER, FRANK D
Address 8110 SW 43RD PL
City-State-Zip: GAINESVILLE FL 32608

Title TREASURER
Name SMOCK, ANDREW DR.
Address 13522 NW 9TH ROAD
City-State-Zip: NEWBERRY FL 32669

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: ANDREW SMOCK

03/16/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date