

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000051461

Entity Name: MATHEWS & CRIPE, LLC

Current Principal Place of Business:

3430 KORI ROAD
SUITE 6
JACKSONVILLE, FL 32257

Current Mailing Address:

3430 KORI ROAD
SUITE 6
JACKSONVILLE, FL 32257 44

FEI Number: 26-0175717

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRIFE, TRACY CPA
3430 KORI ROAD
SUITE 6
JACKSONVILLE, FL 32257 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: TRACY S CRIPE

01/11/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CRIPE, TRACY S
Address 3430 KORI ROAD, SUITE 6
City-State-Zip: JACKSONVILLE FL 32257

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: TRACY S CRIPE

MGRM

01/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date