

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000018295

Entity Name: JAX MEDIATION CENTER, LLC

Current Principal Place of Business:

2700 UNIVERSITY BLVD WEST, STE. A-1
JACKSONVILLE, FL 32217

Current Mailing Address:

2700-C UNIVERSITY BLVD. W.
JACKSONVILLE, FL 32217

FEI Number: 80-0359331

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHUTT, DENNIS R
2700 UNIVERSITY BLVD WEST, STE. A-1
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 MGRM
Name SCHUTT, DENNIS R
Address 2700 UNIVERSITY BLVD WEST, STE.
A-1
City-State-Zip: JACKSONVILLE FL 32217

Title MGRM
Name SCHMIDT, PENNY W
Address 2700 UNIVERSITY BLVD WEST, STE.
A-1
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: DENNIS R. SCHUTT

MGMR

04/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date