

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000079288

**FILED  
Jan 13, 2018  
Secretary of State  
CC0614577226**

**Entity Name:** 2210 OXBOW LIMITED LIABILITY COMPANY

**Current Principal Place of Business:**

3593 WESTOVER RD  
FLEMING ISLAND, FL 32003

**Current Mailing Address:**

3593 WESTOVER RD  
FLEMING ISLAND, FL 32003

**FEI Number:** 27-0765942

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROOKS, L FREEMAN  
3593 WESTOVER RD  
FLEMING ISLAND, FL 32003 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	Title	AUTHORIZED MEMBER
Name	BROOKS, L. FREEMAN	Name	BROOKS, L FREEMAN
Address	3593 WESTOVER ROAD	Address	3593 WESTOVER RD
City-State-Zip:	ORANGE PARK FL 32003	City-State-Zip:	FLEMING ISLAND FL 32003

*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:** L.FREEMAN BROOKS

**MANGER**

**01/13/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date