#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000096553

Entity Name: BEYOND LIMITS OF NORTHEAST FLORIDA, LLC

Feb 07, 2019 Secretary of State 1539013112CC

**FILED** 

## **Current Principal Place of Business:**

5233 SAN JOSE BOULEVARD JACKSONVILLE. FL 32207

## **Current Mailing Address:**

5233 SAN JOSE BOULEVARD JACKSONVILLE, FL 32207 US

FEI Number: 27-1172851 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CHEFAN, JEFFREY F 5233 SAN JOSE BOULEVARD JACKSONVILLE, FL 32207 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: JEFFREY CHEFAN 02/07/2019

Electronic Signature of Registered Agent

Date

#### Authorized Person(s) Detail :

Title CEO, MANAGER Title CHAIRMAN

Name CHEFAN, JEFFREY F Name MOORMAN, BRIAN

Address 5233 SAN JOSE BOULEVARD Address 5233 SAN JOSE BOULEVARD

City-State-Zip: JACKSONVILLE FL 32207 City-State-Zip: JACKSONVILLE FL 32207

Title MANAGER Title MANAGER

Name MORRMAN, BRIAN Name CUTAJAR, JOSEPH

Address 820 HWY A1A N Address 5548 FIRST COAST HWY

SUITE E-15 SUITE #101

City-State-Zip: PONTE VEDRA BEACH FL 32082 City-State-Zip: AMELIA ISLAND FL 32034

Title AMBR Title AMBR

NameIZZO, LOUISNameCOLLINS, DANAddress270 BROADWAYAddress270 BROADWAY

SUITE #103 SUITE #103

City-State-Zip: SARATOGA SPRINGS NY 12866 City-State-Zip: SARATOGA SPRINGS NY 12866

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: JEFFREY CHEFAN

**CEO** 

02/07/2019