## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000012016

Entity Name: XV ENTERPRISES, LLC

**Current Principal Place of Business:** 

2220 COUNTY ROAD 210W, SUITE 108, PMB 404

JACKSONVILLE, FL 32259

## **Current Mailing Address:**

2220 COUNTY ROAD 210W, SUITE 108, PMB 404 JACKSONVILLE, FL 32259 US

FEI Number: 27-1798658 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARTER, JOHN 2220 COUNTY ROAD 210W, SUITE 108, PMB 404 JACKSONVILLE, FL 32259 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: JOHN CARTER 03/10/2016

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE Title MANAGING MEMBER
Name CARTER, JOHN Name TEBOW, TIMOTHY

Address 2220 COUNTY ROAD 210W, SUITE Address 2220 COUNTY ROAD 210W, SUITE

108, PMB 404 108, PMB 404

City-State-Zip: JACKSONVILLE FL 32259 City-State-Zip: JACKSONVILLE FL 32259

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: JOHN CARTER

Electronic Signature of Signing Authorized Person(s) Detail

REGISTERED AGENT

03/10/2016

FILED Mar 10, 2016

**Secretary of State** 

CC4987183055

Date