## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000086807

Entity Name: 2SHACKS, LLC

**Current Principal Place of Business:** 

4455 BAYMEADOWS RD. 106

JACKSONVILLE, FL 32217

**Current Mailing Address:** 

PO BOX 600335

JACKSONVILLE, FL 32260 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHACKLEFORD, SALEE 4455 BAYMEADOWS RD 106 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: SALEE SHACKLEFORD 04/16/2014

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGRM

SHACKLEFORD, ROBERT D Name 4455 BAYMEADOWS RD #106 Address 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.

Date

**FILED** Apr 16, 2014

**Secretary of State** 

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