

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000177162

Entity Name: ADJECTIVE & COMPANY, LLC**Current Principal Place of Business:**333 4TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250-5621**Current Mailing Address:**333 4TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250-5621 US**FEI Number:** 46-4388579**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NORTHWEST REGISTERED AGENT LLC
7901 4TH ST N
SUITE 300
ST. PETERSBURG, FL 33702 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:** TOM GLOVER

04/29/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM
Name	VERB VENTURES, LLC
Address	333 4TH AVENUE NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250-5621

Title	CHIEF CREATIVE OFFICER
Name	HARKEY, TAYLOR
Address	333 4TH AVENUE NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250-5621

Title	MGRM
Name	TRIPLE STAMP, LLC
Address	333 4TH AVENUE NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250-5621

Title	PRESIDENT
Name	BERRANG, AUTUMN
Address	333 4TH AVENUE NORTH
City-State-Zip:	JACKSONVILLE BEACH FL 32250-5621

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: AUTUMN BERRANG

PRESIDENT

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date