

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000017917

**Entity Name:** EYES WIDE AWAKE LLC

**Current Principal Place of Business:**

2821 DOWNING ST  
JACKSONVILLE, FL 32205

**Current Mailing Address:**

2821 DOWNING ST  
JACKSONVILLE, FL 32205 US

**FEI Number:** 46-4724645

**Certificate of Status Desired:** No

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

LANDENBERGER, CHAD  
2821 DOWNING ST  
JACKSONVILLE, FL 32205 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           MANAGER  
Name           LANDENBERGER, CHAD  
Address        2821 DOWNING ST  
City-State-Zip: JACKSONVILLE FL 32205

*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:** CHAD LANDENBERGER

MR.

02/01/2021

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date