

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000091501

**Entity Name:** ATLANTIC FLORIST LLC

**Current Principal Place of Business:**

2434 ATLANTIC BLVD  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

2434 ATLANTIC BLVD  
JACKSONVILLE, FL 32207 US

**FEI Number:** 47-1077394

**Certificate of Status Desired:** No

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

WILLIAMS, BERT A JR  
9954 ARNOLD ROAD  
JACKSONVILLE, FL 32246 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:** BERT A WILLIAMS JR

06/07/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ADLER, GARY E  
Address 2434 ATLANTIC BLVD  
City-State-Zip: JACKSONVILLE FL 32207

Title MBR  
Name WILLIAMS, BERT A JR  
Address 3837 SOUTHSIDE BLVD  
City-State-Zip: JACKSONVILLE FL 32216

*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:** GARY E ADLER

MGR

06/07/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date