## 2017 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 01/03/2017

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR Title MBR

NameADLER, GARY ENameWILLIAMS, BERT A JRAddress2434 ATLANTIC BLVDAddress3837 SOUTHSIDE BLVDCity-State-Zip:JACKSONVILLE FL 32207City-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: BERT A WILLIAMS JR

Electronic Signature of Signing Authorized Person(s) Detail

MEMBER

01/03/2017

FILED Jan 03, 2017

**Secretary of State** 

CC1105923846

Date