# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L14000162854

#### Entity Name: BLOCK FIVE LLC

## **Current Principal Place of Business:**

ONE INDEPENDENT DRIVE, SUITE 1200 JACKSONVILLE, FL 32202

#### **Current Mailing Address:**

PO BOX 550860 JACKSONVILLE, FL 32255-0860 US

## FEI Number: 47-2112363

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

CONTEGA BUSINESS SERVICES, LLC ONE INDEPENDENT DRIVE, SUITE 1200 JACKSONVILLE, FL 32202 US

Certificate of Status Desired: No

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	Title	VP	
Name	NORTH PLATTE LLC	Name	MCAFEE, MATTHEW S	
Address	ONE INDEPENDENT DRIVE, SUITE 1200	Address	ONE INDEPENDENT DRIVE, SUITE 1200	
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202	

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: NORTH PLATTE LLC, BY CONTEGA BUSINESS SERVICES, LLC, ITS MANAGER, BY MATTHEW S. MCAFEE, ITS EXECUTIVE VICE PRESIDENT

MANAGER

02/26/2016

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 26, 2016 Secretary of State CC6623728042