

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000168085

Entity Name: NOLEGATOR, LLC

Current Principal Place of Business:

33 OBAN CT
ST JOHNS, FL 32259

Current Mailing Address:

33 OBAN CT
ST JOHNS, FL 32259 US

FEI Number: 47-2214153

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS COURT
SUITE A
TAMPA, FL 33612 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	AMBR	Title	AMBR
Name	CLARKE, SUZANNE	Name	CLARKE, SCOTT
Address	33 OBAN CT	Address	33 OBAN CT
City-State-Zip:	ST JOHNS FL 32259	City-State-Zip:	ST JOHNS FL 32259

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: SUZANNE CLARKE

AMBR

03/08/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date