

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000149940

Entity Name: 3030 POWERS AVE, LLC

Current Principal Place of Business:

3030 POWERS AVENUE
JACKSONVILLE, FL 32207

Current Mailing Address:

7880 GATE PARKWAY
SUITE 300
JACKSONVILLE, FL 32256

FEI Number: 47-5051816

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASHOURIAN, JUSTIN
7880 GATE PARKWAY
SUITE 300
JACKSONVILLE, FL 32256 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 MGR
Name ASHOURIAN, JUSTIN
Address 7880 GATE PARKWAY SUITE 300
City-State-Zip: JACKSONVILLE FL 32256

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: JUSTIN ASHOURIAN

03/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date