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: KURT M ROBERTSON

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L15000165127

Entity Name: HAMMOCK BREEZE LLC

Current Principal Place of Business:

60 N ANCHORS LAKE DRIVE SANTA ROSA BEACH, FL 32459

Current Mailing Address:

60 N ANCHORS LAKE DRIVE SANTA ROSA BEACH, FL 32459 US

FEI Number: 47-5189556

Name and Address of Current Registered Agent:

ROBERTSON, SABINE 60 N ANCHORS LAKE DRIVE SANTA ROSA BCH, FL 32459 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.

2020 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	ROBERTSON, KURT M	Name	ROBERTSON, SABINE D
Address	60 N ANCHORS LAKE DRIVE	Address	60 N ANCHORS LAKE DRIVE
City-State-Zip:	SANTA ROSA BEACH FL 32459	City-State-Zip:	SANTA ROSA BEACH FL 32459

cate of Status Desired: No

PRESIDENT

05/27/2020

FILED May 27, 2020 Secretary of State 9703350868CC

Date

Date