#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000037371

Entity Name: TMT JAX, LLC

## Current Principal Place of Business:

9450 PHILIPS HWY STE 1 JACKSONVILLE, FL 32256

# **Current Mailing Address:**

P.O. BOX 56345 JACKSONVILLE, FL 32241 US

# FEI Number: 81-1575790

## Name and Address of Current Registered Agent:

COOK, KEVIN 818 A1A N STE 208 PONTE VEDRA, FL 32082 US FILED Feb 12, 2020 Secretary of State 8207704598CC

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	E: KEVIN COOK			02/12/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	AUTHORIZED MEMBER	
Name	GOLDEN, MARK A	Name	MASON, STEPHEN	
Address	7445 ASHLAND LANE	Address	9450 PHILIPS HWY	
City-State-Zip:	VESTAVIA HILLS AL 35242	City-State-Zip:	STE 1 JACKSONVILLE FL 32256	
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER	
Name	KING, JEREMY	Name	RUFFING , PETER	
Address	9450 PHILIPS HWY STE 1	Address	9450 PHILIPS HWY STE 1	
City-State-Zip:	JACKSONVILLE FL 32256	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: MARK GOLDEN

MGR

Electronic Signature of Signing Authorized Person(s) Detail