

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000079644

**FILED**  
**Jan 14, 2018**  
**Secretary of State**  
**CC3882368972**

**Entity Name:** 2 DOORS DOWN RESTORATIONS + LLC

**Current Principal Place of Business:**

10931 ROCK ISAND ROAD  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

10931 ROCK ISAND ROAD  
JACKSONVILLE, FL 32257

**FEI Number:** 82-1411215

**Certificate of Status Desired:** Yes

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

TAYLOR, JAMES R  
10853 ROCK ISLAND ROAD  
JACKSONVILLE, FL 32257 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            PRES  
Name            TAYLOR, JAMES R  
Address        GENERAL DELIVERY  
City-State-Zip: JACKSONVILLE FL 32219

Title            VP  
Name            STANCIL, RHONDA M  
Address        10931 ROCK ISLAND RD  
City-State-Zip: JACKSONVILLE FL 32257

*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:** JAMES TAYLOR

**PRESIDENT**

**01/14/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date