| 2022 | FI ORIDA | I IABII ITY | COMPANY | ANNUAL REPORT |
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DOCUMENT# L17000087000

Entity Name: MOUNTOUF, LLC

Current Principal Place of Business:

1013 ST. JULIEN COURT ST. JOHNS, FL 32259

Current Mailing Address:

1013 ST. JULIEN COURT ST. JOHNS, FL 32259 US

FEI Number: 82-1236063

Name and Address of Current Registered Agent:

FARAH LAW 6550 ST. AUGUSTINE ROAD SUITE 103 JACKSONVILLE, FL 32217 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: | NATURE: JAMES E. FARAH, ESQ. | | | | | |
| | | Electronic Signature of Registered Agent | | | | | |
| Authorized Person(s) Detail : | | | | | | | |
| | Title | AMBR | Title | AMBR | | | |
| | Name | LYONS, JOHN | Name | LYONS, MARY | | | |
| | Address | 1013 ST. JULIEN COURT | Address | 1013 ST. JULIEN COURT | | | |
| | 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.

AMBR

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 08, 2022 Secretary of State 3950970671CC

Certificate of Status Desired: No