# 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 ROBERTSON

Electronic Signature of Signing Authorized Person(s) Detail

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 |

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|------------------------------------|--------------------|

DOCUMENT# L17000098218

Entity Name: HAMMOCK BREEZE 2 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

# Name and Address of Current Registered Agent:

ROBERTSON, SABINE D 60 N ANCHORS LAKE DRIVE SANTA ROSA BEACH 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.

# FEI Number: 82-1477004

PRESIDENT

03/05/2021

FILED Mar 05, 2021 Secretary of State 0326344491CC

Date

Certificate of Status Desired: No

Date