

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000235119

**Entity Name:** 144KNIGHTS LLC

**Current Principal Place of Business:**

1648 TAYLOR ROAD  
STE 158  
PORT ORANGE, FL 32127

**Current Mailing Address:**

1648 TAYLOR ROAD  
STE 158  
PORT ORANGE, FL 32127 US

**FEI Number:** 82-3423989

**Certificate of Status Desired:** No

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

PHILLIPS, JAMES  
1648 TAYLOR ROAD  
STE 158  
PORT ORANGE, FL 32127 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 MGR  
Name PHILLIPS, JAMES  
Address 1648 TAYLOR ROAD  
STE 158  
City-State-Zip: PORT ORANGE FL 32127

Title MGR  
Name PHILLIPS, JAMES SR  
Address 1648 TAYLOR ROAD  
STE 158  
City-State-Zip: PORT ORANGE FL 32127

*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 PHILLIPS

**MANAGER**

**02/28/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date