

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000131078

**Entity Name:** FAMOUS QUICK LUBE #9, LLC**Current Principal Place of Business:**6135 ST. AUGUSTINE ROAD  
JACKSONVILLE, FL 32217**Current Mailing Address:**3212 UNIVERSITY BOULEVARD SOUTH  
JACKSONVILLE, FL 32216**FEI Number: 83-0938402****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**AKEL, JAMEEL  
3212 UNIVERSITY BOULEVARD SOUTH  
JACKSONVILLE, FL 32216 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	AKEL, JAMEEL
Address	91 NINEWELLS LANE
City-State-Zip:	ST. JOHNS FL 32259

Title	MGR
Name	FAKHOURI, JERRY
Address	281 ISLEBROOK PKWY
City-State-Zip:	ST JOHNS FL 32259

Title	MGR
Name	AKEL, ANDY
Address	25 NINEWELLS LANE
City-State-Zip:	ST. JOHNS FL 32259

Title	MGR
Name	SCHROEDER, CHRISTOPHER
Address	169 ISLEBROOK PARKWAY
City-State-Zip:	ST. JOHNS FL 32259

Title	MGR
Name	AKEL, MICHAEL
Address	724 CASTLEDALE COURT
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.*

**SIGNATURE: ANDY AKEL****OWNER****02/05/2019**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date