# 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

SIGNATURE: PATRICIA SHUFFIELD

Electronic Signature of Signing Authorized Person(s) Detail

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000186782

Entity Name: 36 GULF COVE COURT, LLC

#### **Current Principal Place of Business:**

5108 WALDENBROOKE COURT ACWORTH, GA 30101

# **Current Mailing Address:**

5108 WALDENBROOKE COURT ACWORTH, GA 30101

# FEI Number: 83-1609603

## Name and Address of Current Registered Agent:

URS AGENTS, LLC 3458 LAKESHORE DRIVE TALLAHASSEE, FL 32312 US Certificate of Status Desired: No

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

#### Authorized Person(s) Detail :

Title	AMBR	Title	MGR
Name	SHUFFIELD, PATRICIA	Name	SHUFFIELD, ROBERT
Address	5108 WALDENBROOKE COURT	Address	5108 WALDENBROOKE COURT
City-State-Zip:	ACWORTH GA 30101	City-State-Zip:	ACWORTH GA 30101

02/0

02/08/2022

Date

Date