

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000192993

**Entity Name:** JAX45GROUP, LLC

**Current Principal Place of Business:**

109 LINKSIDE CIR  
PONTE VEDRA, FL 32082

**Current Mailing Address:**

109 LINKSIDE CIR  
PONTE VEDRA, FL 32082 US

**FEI Number:** 83-1502981

**Certificate of Status Desired:** No

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

CUMMINGS, MICHELLE  
109 LINKSIDE CIR  
PONTE VEDRA, FL 32082 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:** MICHELLE CUMMINGS

01/30/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CUMMINGS, MICHELLE  
Address 109 LINKSIDE CIR  
City-State-Zip: PONTE VEDRA FL 32082

Title MANAGER  
Name CUMMINGS, ANDREW  
Address 109 LINKSIDE CIR  
City-State-Zip: PONTE VEDRA FL 32082

*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:** MICHELLE CUMMINGS

MANAGER

01/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date