

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000200716

Entity Name: AXE ON AXE OFF LLC

Current Principal Place of Business:

1355 WEST SAND LAKE RD,
UNIT 4
ORLANDO, FL 32809

Current Mailing Address:

1355 WEST SAND LAKE RD,
UNIT 4
ORLANDO, FL 32809 US

FEI Number: 83-1696282

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOMBS, MICHAEL E JR
248 CAPE SABLE DRIVE
ORLANDO, FL 32825 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 | Title | MGR |
| Name | COOMBS, RYAN M | Name | COOMBS, MICHAEL E JR |
| Address | 212 CAPE SABLE DR | Address | 248 CAPE SABLE DRIVE |
| City-State-Zip: | ORLANDO FL 32825 | City-State-Zip: | ORLANDO FL 32825 |
| | | | |
| Title | ADMINISTRATIVE REPRESENTATIVE | | |
| Name | COREY, THOMAS J | | |
| Address | 326 TIMBER GROVE COURT | | |
| City-State-Zip: | ORLANDO FL 32828 | | |

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: COOMBS, MICHAEL E, JR

MANAGER

01/24/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date