

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000065249

**Entity Name:** MARSHAL AUSTEN, LLC

**Current Principal Place of Business:**

5228 S. WILLIAMSON BLVD STE 1414  
PORT ORANGE, FL 32128

**Current Mailing Address:**

5228 S. WILLIAMSON BLVD STE 1414  
PORT ORANGE, FL 32128 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KOREY, R.KEVIN  
595 W. GRANADA BLVD STE A  
ORMOND BEACH, FL 32174 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 AMBR  
Name JONES, MARK C  
Address 1415 OCEAN SHORE BLVD APT 1102  
City-State-Zip: ORMOND BEACH FL 32176

Title AMBR  
Name BROWN, SCOTT  
Address 835 E. 15TH AVE  
City-State-Zip: NEW SMYRNA BEACH FL 32169

*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:** JONES , MARK C

AMBR

02/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date