## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000241375

**Entity Name: CROSS LLAVES LLC** 

**Current Principal Place of Business:** 

8005 MACINNES DRIVE JACKSONVILLE, FL 32244

**Current Mailing Address:** 

8005 MACINNES DRIVE JACKSONVILLE. FL 32244 US

FEI Number: 84-3308825 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ASHLEY, VALERIE 8005 MACINNES DRIVE JACKSONVILLE, FL 32244 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: VALERIE ASHLEY 03/21/2022

Electronic Signature of Registered Agent

Date

FILED Mar 21, 2022

**Secretary of State** 

0007249043CC

Authorized Person(s) Detail:

Title MGR Title MGR

NameSCHULER, JOHN PNameSCHULER, SHEILA MAddress8005 MACINNES DRIVEAddress8005 MACINNES DRIVECity-State-Zip:JACKSONVILLE FL 32244City-State-Zip:JACKSONVILLE FL 32244

Title AR

Name ASHLEY, VALERIE

Address 8005 MACINNES DRIVE
City-State-Zip: JACKSONVILLE FL 32244

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: JOHN P. SCHULER

Electronic Signature of Signing Authorized Person(s) Detail

**MGR** 

03/21/2022