

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000271993

Entity Name: SEMI FORMAL LLC

Current Principal Place of Business:

8501 MABEL DR
JACKSONVILLE, FL 32256

Current Mailing Address:

8501 MABEL DR
JACKSONVILLE, FL 32256 US

FEI Number: 84-3740083

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEVENS, JOHN P. CPA
4209 BAYMEADOWS ROAD
SUITE 1
JACKSONVILLE, FL 32217 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
Name THOMAS, STEPHEN L
Address 8501 MABEL DR
City-State-Zip: JACKSONVILLE FL 32256

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: STEPHEN THOMAS

MR

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date