

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000094569

Entity Name: ATLANTIC EDGE LLC

Current Principal Place of Business:

7749 NORMANDY BLVD
#121-557
JACKSONVILLE, FL 32221

Current Mailing Address:

7749 NORMANDY BLVD
#121-557
JACKSONVILLE, FL 32221 US

FEI Number: 85-0608510

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MAGNUSSEN, ANTHONY
7749 NORMANDY BLVD #121-557
JACKSONVILLE, FL 32221 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 | MANAGER |
| Name | MAGNUSSEN, ANTHONY | Name | HOVERTER, SANDRA |
| Address | 7749 NORMANDY BLVD #121-557 | Address | 7749 NORMANDY BLVD #121-557 |
| City-State-Zip: | JACKSONVILLE FL 32221 | City-State-Zip: | JACKSONVILLE FL 32221 |

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: ANTHONY MAGNUSSEN

MGR

02/20/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date