

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000177406

Entity Name: BOLD CITY DISTRIBUTORS, LLC

Current Principal Place of Business:

8930 WESTERN WAY
SUITE 110
JACKSONVILLE, FL 32256

Current Mailing Address:

8930 WESTERN WAY
SUITE 110
JACKSONVILLE, FL 32256 US

FEI Number: 85-1737793

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OUTSOURCED LIFESTYLE, LLC
14333 BEACH BLVD UNIT 33
JACKSONVILLE, FL 32250 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 ONEIL, JOHN
Address 1532 SWEET PLUM CIRCLE
City-State-Zip: TALLAHASSEE FL 32312

Title MGR
Name DEJOSEPH, GERARD
Address 10550 BAYMEADOWS RD UNIT 115
City-State-Zip: JACKSONVILLE FL 32256

Title MGR
Name ONEIL, JASON
Address 4437 PORT ARTHUR ROAD
City-State-Zip: JACKSONVILLE FL 32204

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: GEOFF ROVEGNO

CONTROLLER

04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date