

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000178162

Entity Name: BLACK CARD SECURITY, LLC

Current Principal Place of Business:

5501 WESCONNECT BLVD
#14785
JACKSONVILLE, FL 32238

Current Mailing Address:

8654 TRISTAN DRIVE
JACKSONVILLE, FL 32210

FEI Number: 85-3622418

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOYER, SHAWANA
5501 WESCONNECT BLVD
14785
JACKSONVILLE, FL 32238 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 CEO
Name BOYER, LENELL
Address 5501 WESCONNECT BLVD, 14785
City-State-Zip: JACKSONVILLE FL 32238

Title MGR
Name BOYER, SHAWANA
Address 5501 WESCONNECT BLVD, 14785
City-State-Zip: JACKSONVILLE FL 32238

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: SHAWANA BOYER

MANAGER

04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date