

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000226092

**Entity Name:** HILAIRE FAMILIES LLC

**Current Principal Place of Business:**

221 N.HOGAN ST  
529  
JACKSONVILLE, FL 32202

**Current Mailing Address:**

4081 EVERETT AVE  
MIDDLEBURG, FL 32068 US

**FEI Number:** 85-2803932

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CEASER, MICHAEL  
1840 SOUTHSIDE BLVD  
2A  
JACKSONVILLE, FL 32216 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:** CEASER MICHAEL

04/29/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           HILAIRE, MAXIMOND  
Address        4081 EVERETT AVE  
City-State-Zip: MIDDLEBURG FL 32068

*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:** MAXIMOND HILAIRE

MANAGER

04/29/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date