

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000254071

**Entity Name:** A WARRIOR ENTERPRISES, LLC

**Current Principal Place of Business:**

2022 DELLWOOD AVE  
APT 5  
JACKSONVILLE, FL 32204

**Current Mailing Address:**

2022 DELLWOOD AVE  
APT 5  
JACKSONVILLE, FL 32204 US

**FEI Number:** 85-2895680

**Certificate of Status Desired:** No

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

SPURR, MICAH K  
2022 DELLWOOD AVE  
APT 5  
JACKSONVILLE, FL 32204 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 AUTHORIZED MEMBER  
Name SPURR, MICAH K  
Address 2022 DELLWOOD AVE  
APT 5  
City-State-Zip: JACKSONVILLE FL 32204

Title AUTHORIZED MEMBER  
Name SPURR, ASHLEY  
Address 2022 DELLWOOD AVE  
APT 5  
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:** MICAH SPURR

**MEMBER**

**01/13/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date