

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000093854

Entity Name: GRIERPROP LLC

Current Principal Place of Business:

547 MARTIN LAKES DR S
JACKSONVILLE, FL 32220

Current Mailing Address:

PO BOX 6962
JACKSONVILLE, FL 32236

FEI Number: 86-2311762

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GRIER, JAMIE N
547 MARTIN LAKES DR S
JACKSONVILLE, FL 32220 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 GRIER, JAMIE N
Address PO BOX 6962
City-State-Zip: JACKSONVILLE FL 32236

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: JAMIE N GRIER

MANAGER

03/04/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date