

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000338974

Entity Name: NEW OUTPOST, LLC

Current Principal Place of Business:

ONE INDEPENDENT DR STE 1200
JACKSONVILLE, FL 32202

Current Mailing Address:

ONE INDEPENDENT DR STE 1200
JACKSONVILLE, FL 32202 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DR STE 1200
JACKSONVILLE, FL 32202 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 MANAGER
Name NEW FRIENDS, LLC
Address ONE INDEPENDENT DR STE 1200
City-State-Zip: JACKSONVILLE FL 32202

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: NEW FRIENDS, LLC

MANAGER

04/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date