

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000018680

Entity Name: NINE 6 NINE LLC

Current Principal Place of Business:

5984 MARTIN LUTHER KING DR.
JACKSONVILLE, FL 32219

Current Mailing Address:

P.O. BOX 61751
JACKSONVILLE, FL 32236 US

FEI Number: 87-4695950

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GRANT, LAVELLE
5984 MARTIN LUTHER KING DR.
JACKSONVILLE, FL 32219 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 AP
Name GRANT, LAVELLE
Address 5984 MARTIN LUTHER KING DRIVE
City-State-Zip: JACKSONVILLE FL 32219

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: LAVELLE GRANT

AP

01/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date