## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000008868

Entity Name: PF PALATKA, LLC

**Current Principal Place of Business:** 

111 TOWN & COUNTRY DR PALATKA, FL 32177

Current Frincipal Flace of Business.

**Current Mailing Address:** 

PO BOX 4007

PORTSMOUTH, NH 03802 US

FEI Number: 81-5030497 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HERLIHY, JOSPEH 601-B SOUTH, PONCE DE LEON BLVD ST AUGUSTINE, FL 32084 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

FILED Aug 12, 2019

**Secretary of State** 

0521082074CC

Authorized Person(s) Detail:

Title MGRM Title MBR

Name MURRAY, MIKE Name FREGEAU, PETER

Address 4813 LAST STAND DR Address 1177 SAGAMORE RD, #2
City-State-Zip: PARK CITY UT 84098 City-State-Zip: PORTSMOUTH NH 03801

TitleMBRTitleGENERAL COUNSELNamePAPPAS, BRYANNameHERLIHY, JOSEPH

Address 2 BRACKETT LN Address 601 SOUTH PONCE DE LEON BLVD

City-State-Zip: PORTSMOUTH NH 03802

ity-State-Zip: PORTSMOUTH NH 03802 City-State-Zip: ST. AUGUSTINE FL 32084

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: JOSEPH HERLIHY

**GENERAL COUNSEL** 

08/12/2019