

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000020699

**Entity Name:** J & K HOLCOMB HOLDINGS, L.L.C.

**Current Principal Place of Business:**

6767 NW 288TH STREET  
OKEECHOBEE, FL 34972

**Current Mailing Address:**

6767 NW 288TH STREET  
OKEECHOBEE, FL 34972 US

**FEI Number:** 30-0103462

**Certificate of Status Desired:** Yes

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

HOLCOMB, JOHN WJR  
6767 NW 288TH STREET  
OKEECHOBEE, FL 34972 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                  | Title           | MGR                  |
| Name            | HOLCOMB, JOHN WJR    | Name            | HOLCOMB, KIMBERLY    |
| Address         | 6767 NW 288TH STREET | Address         | 6767 NW 288TH STREET |
| City-State-Zip: | OKEECHOBEE FL 34972  | City-State-Zip: | OKEECHOBEE FL 34972  |

*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:** JOHN W HOLCOMB

**MANAGER**

**04/19/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date