

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073627

Entity Name: FLORINDA SHOP, LLC

Current Principal Place of Business:

2360 PARK STREET
JACKSONVILLE, FL 32204

Current Mailing Address:

2360 PARK STREET
JACKSONVILLE, FL 32204

FEI Number: 20-1770017

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROCKWELL, HILLEARY CIII
2360 PARK STREET
JACKSONVILLE, FL 32204 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 ROCKWELL, HILLEARY C
Address 2360 PARK STREET
City-State-Zip: JACKSONVILLE FL 32204

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: HILLEARY C ROCKWELL MD

MANAGER

04/11/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date