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: KERRI PRUITT

Electronic Signature of Signing Authorized Person(s) Detail

Tit Na Ad City-State-Zip: ST. JAMES CITY FL 33956

A

Authorized Person(s) Detail :			
ītle	MGR	Title	MANAGER
lame	COPE, LINDA S	Name	PRUITT, KERRI
Address	3825 EMERALD AVENUE	Address	47267 TOMAHAWK DRIVE

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.

Name and Address of Current Registered Agent:

COPE, LINDA S 3825 EMERALD AVENUE ST. JAMES CITY, FL 33956 US

SIGNATURE:

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000094215

Entity Name: 3811 EMERALD AVE., LLC

Current Principal Place of Business:

3825 EMERALD AVENUE ST. JAMES CITY, FL 33956

Current Mailing Address:

47267 TOMAHAWK DRIVE NEGLEY. OH 44441 US

FEI Number: 20-4231268

Electronic Signature of Registered Agent

City-State-Zip: NEGLEY OH 44441

MANAGER

03/05/2024

Date

FILED Mar 05, 2024 Secretary of State 4627351074CC

Certificate of Status Desired: No

Date