

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L06000100814

Entity Name: SUDDATH OFFICE SOLUTIONS, LLC

Current Principal Place of Business:

815 S MAIN ST
ATTN: LORI EISCHEN
JACKSONVILLE, FL 32207

Current Mailing Address:

PO BOX 48088
ATTN: LORI EISCHEN
JACKSONVILLE, FL 32247

FEI Number: 01-0876080

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GANNON, KEVIN P
815 S.MAIN ST
JACKSONVILLE, FL 32207 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: KEVIN P GANNON

08/17/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name VAUGHN, BARRY S
Address 815 S. MAIN ST
City-State-Zip: JACKSONVILLE FL 32207

Title MANAGER
Name SUDDATH, STEPHEN M
Address 815 S MAIN ST
City-State-Zip: JACKSONVILLE FL 32207

Title MANAGER
Name BARNETT, JAMES G
Address 815 S MAIN ST
City-State-Zip: JACKSONVILLE FL 32207

Title MANAGER
Name STRICKLAND, BARBARA S
Address 815 S MAIN ST
City-State-Zip: JACKSONVILLE FL 32207

Title VP
Name DAVIES, SUSAN
Address 815 S MAIN ST
City-State-Zip: JACKSONVILLE FL 32207

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: JAMES G. BARNETT

MANAGER

08/17/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date