## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000125434

Entity Name: NORTH FLORIDA CYCLES, LLC

ly Name. NORTH FLORIDA CTCLES, LL

**Current Principal Place of Business:** 

24469 HARBOUR VIEW DR SUITE 120

PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:** 

PO BOX 3178

PONTE VEDRA BEACH, FL 32003 US

FEI Number: 11-3830458 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, MARK 24469 HARBOUR VIEW DR PONTE VEDRA BEACH, FL 32082 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 Apr 28, 2018

**Secretary of State** 

CC1690540140

## Authorized Person(s) Detail:

Title MGR

Name ALLEN, MARK Address PO BOX 3178

City-State-Zip: PONTE VEDRA BEACH FL 32004

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: MARK ALLEN MANAGER 04/28/2018