

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000011847

Entity Name: COVESIDE LLC

Current Principal Place of Business:

4530 SAINT JOHNS AVE
STE 15, BOX 126
JACKSONVILLE, FL 32210

Current Mailing Address:

4530 SAINT JOHNS AVE
STE 15, BOX 126
JACKSONVILLE, FL 32210 US

FEI Number: 26-1936631

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOFFSES, KEITH E
1008 ST JOHNS AVE
GREEN COVE SPRINGS, FL 32043 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 MGRM
Name HOFFSES, KEITH E
Address 1008 ST JOHNS AVE
City-State-Zip: GREEN COVE SPRINGS FL 32043

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: KEITH ERVIN HOFFSES

MANAGING MEMBER

02/27/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date