

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000096752

Entity Name: ADAM LOWE LLC

Current Principal Place of Business:

3847 ASHGLEN DRIVE EAST
JACKSONVILLE, FL 32224

Current Mailing Address:

3847 ASHGLEN DRIVE EAST
JACKSONVILLE, FL 32224

FEI Number: 26-3560459

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWE, ADAM B
3847 ASHGLEN DRIVE EAST
JACKSONVILLE, FL 32224 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 LOWE, ADAM B
Address 3847 ASHGLEN DRIVE EAST
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM
Name LOWE, ELIZABETH
Address 3847 ASHGLEN DRIVE EAST
City-State-Zip: JACKSONVILLE FL 32224

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: ADAM LOWE

MGRM

03/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date