Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :			
Title	Р	Title	VP
Name	LEIBINGER, KARL	Name	TEAGUE, MICHAEL
Address	11201 ST. JOHN'S INDUSTRIAL PARKWAY SO.	Address	11201 ST. JOHN'S INDUSTRIAL PARKWAY SO.
City-State-Zip:	JACKSONVILLE FL 32246	City-State-Zip:	JACKSONVILLE FL 32246
Title	VP	Title	VP
Name	ANGRESANO, CYNTHIA	Name	LEIBINGER, CHRISTIAN
Address	11201 ST. JOHN'S INDUSTRIAL PARKWAY SO.	Address	11201 ST. JOHN'S INDUSTRIAL PARKWAY SO.
City-State-Zip:	JACKSONVILLE FL 32246	City-State-Zip:	JACKSONVILLE FL 32246
Title	S		
Name	LUNNY, GREGORY		
Address	1301 RIVERPLACE BLVD, SUITE 1500		
City-State-Zip:	JACKSONVILLE FL 32207		

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.

Current Mailing Address: PO BOX 16369

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CURLEY, JR., CHARLES RESQ. 1301 RIVERPLACE BLVD., SUITE 1500 JACKSONVILLE, FL 32207 US

DOCUMENT# L09000067270 Entity Name: 11201 ST. JOHNS INDUSTRIAL PARKWAY, SOUTH, LLC

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

11201 ST. JOHN'S INDUSTRIAL PARKWAY, SOUTH JACKSONVILLE, FL 32246

JACKSONVILLE, FL 32245

FEI Number: 27-0546952

SIGNATURE:

Certificate of Status Desired: No

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: CYNTHIA ANGRESANO

03/28/2016 EXECUTIVE DIRECTOR OF OPERATIONS

FILED Mar 28, 2016 Secretary of State CC2416783017

Date

Date