

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000075977

Entity Name: OKT, LLC

Current Principal Place of Business:

ONE INDEPENDENT DRIVE
STE 1300
JACKSONVILLE , FL 32202-5017

Current Mailing Address:

P.O. BOX 1391
NOKOMIS, FL 34274 US

FEI Number: 27-0748009

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F&L CORP.
ONE INDEPENDENT DRIVE SUITE 1300
JACKSONVILLE, FL 32202-5017 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 MGR
Name OKT, LLC
Address P.O. BOX 1391
City-State-Zip: NOKOMIS FL 34274

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: JEN ROSE

MANAGER

04/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date