

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000020705

Entity Name: ZAKARIAH JOHNSON, PLLC

Current Principal Place of Business:

425 S ELVERTON PL
ST. JOHNS, FL 32259

Current Mailing Address:

P.O. BOX 600017
JACKSONVILLE
FLORIDA, FL 32260 US

FEI Number: 27-1972296

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, ZAKARIAH ESQ
425 S ELVERTON PL
ST. JOHNS, FL 32259 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 JOHNSON, ZAKARIAH ESQ
Address 425 S ELVERTON PL
City-State-Zip: ST JOHNS FL 32259

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: ZAKARIAH JOHNSON

MGMR

04/28/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date