

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000026268

Entity Name: PORTFOLIO JACKSONVILLE, LLC

Current Principal Place of Business:

221 N. HOGAN STREET, NO. 307
JACKSONVILLE, FL 32202

Current Mailing Address:

221 N. HOGAN STREET, NO. 307
JACKSONVILLE, FL 32202

FEI Number: 27-5310692

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONTEGA BUSINESS SERVICES, LLC
ONE INDEPENDENT DRIVE, SUITE 1200
JACKSONVILLE, FL 32202 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	MANAGER	Title	MANAGER
Name	SCOTT, R. DEAN	Name	SCOTT, LAURIE K
Address	221 N. HOGAN STREET, NO. 307	Address	221 N. HOGAN STREET, NO. 307
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202

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: R. DEAN SCOTT

MANAGER

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date