

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000033265

Entity Name: BACKFLOW JACKET, LLC

Current Principal Place of Business:

5960 JULIE AVENUE
JACKSONVILLE, FL 32254

Current Mailing Address:

5960 JULIE AVENUE
JACKSONVILLE, FL 32254 US

FEI Number: 45-1291990

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEVINE, JEREMY M
5960 JULIE AVENUE
JACKSONVILLE, FL 32254 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 DEVINE, JEREMY M
Address 5960 JULIE AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title MGRM
Name DEVINE, KRISTIN H
Address 5960 JULIE AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title MGRM
Name DEVINE, DONNA J
Address 5960 JULIE AVENUE
City-State-Zip: JACKSONVILLE FL 32254

Title DIRECTOR
Name DEVINE, MICHAEL J
Address 4737 LONG BOW ROAD
City-State-Zip: JACKSONVILLE FL 32210

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: MICHAEL DEVINE

DIRECTOR

01/22/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date