

2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L11000049258

Entity Name: LITTORAL, LLC

Current Principal Place of Business:

1 INDEPENDENT DR.
SUITE 1400
JACKSONVILLE, FL 32202

Current Mailing Address:

1 INDEPENDENT DR.
SUITE 1400
JACKSONVILLE, FL 32202 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FAULKNER, ADRIAN H
1 INDEPENDENT DR.
SUITE 1400
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: ADRIAN H. FAULKNER

11/03/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FAULKNER, ADRIAN H.
Address 1 INDEPENDENT DR.
SUITE 1400
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: ADRIAN H. FAULKNER

MGR

11/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date