

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000059724

**Entity Name:** FD ONE LLC

**Current Principal Place of Business:**

4446-1A HENDRICKS AVENUE, STE 259  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4446-1A HENDRICKS AVENUE, STE 259  
JACKSONVILLE, FL 32207 US

**FEI Number:** 45-5214911

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DJEBRAEILI, FARIDEH  
4446-1A HENDRICKS AVENUE, STE 259  
JACKSONVILLE, FL 32207 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, MEMBER  
Name DJEBRAEILI, FARIDEH  
Address 4446-1A HENDRICKS AVENUE, STE 259  
City-State-Zip: JACKSONVILLE FL 32207

Title MGR  
Name REZAEI, ARIO  
Address 4446-1A HENDRICKS AVENUE, STE 259  
City-State-Zip: JACKSONVILLE FL 32207

Title MANAGER  
Name ARASH, REZAEI  
Address 4446-1A HENDRICKS AVENUE, STE 259  
City-State-Zip: JACKSONVILLE FL 32207

*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:** FARIDEH DJEBRAEILI

**MANAGING MEMBER**

**04/28/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date