

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000057469

Entity Name: KTS JAX LLC

Current Principal Place of Business:

11337 CHAPELGATE LANE
JACKSONVILLE, FL 32223

Current Mailing Address:

PO BOX 8350
JACKSONVILLE, FL 32239

FEI Number: 46-2582264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEWIS, MICHAEL J JR.
11337 CHAPELGATE LANE
JACKSONVILLE, FL 32223 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 LEWIS, MICHAEL J JR
Address PO BOX 8350
City-State-Zip: JACKSONVILLE FL 32239

Title MGRM
Name LEWIS, DELISA
Address PO BOX 8350
City-State-Zip: JACKSONVILLE FL 32239

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 LEWIS

MGRM

04/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date