

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000000574

Entity Name: MONTICELLO TIMBERLANDS, LLC

Current Principal Place of Business:

79 S MAIN ST, STE 1100
SALT LAKE CITY, UT 84111

Current Mailing Address:

C/O DAVID A. CHANNER
50 E. NORTH TEMPLE 2WW
SALT LAKE CITY, UT 84150 US

FEI Number: 46-4540321

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

F & L CORP
ONE INDEPENDENT DR
STE 1300
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
Name ROSE, DOUGLAS L.
Address 79 S. MAIN ST., SUITE 1100
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGER
Name JACOBSEN, K. ERIK
Address 79 S. MAIN ST., SUITE 1100
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGER
Name ARCHIBALD, MICHAEL
Address 79 S MAIN ST, STE 1100
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGER
Name ALLEN, PAUL L.
Address 79 S MAIN ST, STE 1100
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGER
Name GARLICK, BRENT J.
Address 79 S MAIN ST, STE 1100
City-State-Zip: SALT LAKE CITY UT 84111

Title MANAGER
Name ARMSTRONG, DAVID K.
Address 79 S MAIN ST, STE 1100
City-State-Zip: SALT LAKE CITY UT 84111

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: PAUL L. ALLEN

MANAGER

04/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date