

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000038816

Entity Name: HS HERSCHEL 1 LLC

Current Principal Place of Business:

4530 ST JOHNS AVE
SUITE 15 UNIT 329
JACKSONVILLE, FL 32210

Current Mailing Address:

4530 ST. JOHNS AVE
SUITE 15 UNIT 329
JACKSONVILLE, FL 32210 US

FEI Number: 36-4782885

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SLATER, CLAUDE K JR
4530 ST JOHNS AVE
SUITE 15 UNIT 329
JACKSONVILLE, FL 32210 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
Name SLATER, CLAUDE K JR
Address 4530 ST JOHNS AVE
SUITE 15 UNIT 329
City-State-Zip: JACKSONVILLE FL 32210

Title MGR
Name SLATER, JANE
Address 4530 ST JOHNS AVE
SUITE 15 UNIT 329
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: CLAUDE K SLATER JR

MANAGER

03/21/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date