

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000056868

**Entity Name:** KJD RESTORATION, LLC

**Current Principal Place of Business:**

2384 VANS AVENUE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

PO BOX 54225  
JACKSONVILLE, FL 32245 US

**FEI Number:** 46-5331309

**Certificate of Status Desired:** No

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

CALLAHAN, TINA  
4217 BAYMEADOWS ROAD, SUITE 1  
JACKSONVILLE, FL 32217 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:** TINA CALLAHAN

02/14/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name RIVIERE, KEVIN A  
Address 2384 VANS AVENUE  
City-State-Zip: JACKSONVILLE FL 32207

Title MGRM  
Name GENTGES, GERALD R  
Address 2384 VANS AVENUE  
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:** KEVIN A RIVIERE

**OWNER**

02/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date