

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000080249

**Entity Name:** MY JACKSONVILLE LANDSCAPER, LLC

**Current Principal Place of Business:**

1719 PENMAN RD  
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

1719 PENMAN RD  
JACKSONVILLE BEACH, FL 32250 US

**FEI Number:** 46-5690182

**Certificate of Status Desired:** No

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

RIVERA, MICHAEL D  
1719 PENMAN RD  
JACKSONVILLE BEACH, FL 32250 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:** MICHAEL RIVERA

02/13/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           RIVERA, MICHAEL D  
Address        1719 PENMAN ROAD  
City-State-Zip: JACKSONVILLE BEACH FL 32250

Title           MANAGER  
Name           RIVERA, CHENOA D  
Address        1719 PENMAN ROAD  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** CHENOA RIVERA

MGR

02/13/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date