## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000085495

**Entity Name: INVJAXPROP LLC** 

**Current Principal Place of Business:** 

11250 OLD ST. AUGUSTINE RD.

# 15-393

JACKSONVILLE, FL 32257

**Current Mailing Address:** 

11250 OLD ST. AUGUSTINE RD. # 15-393

JACKSONVILLE, FL 32257 US

FEI Number: 46-5766909 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PFMH, LLC DBA THE PROFESSIONAL OFFICES OF MAH 11250 OLD ST. AUGUSTINE RD. # 15-393

JACKSONVILLE, FL 32257 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: PHILIP E. FAINE 04/29/2017

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM

Name HOUSE, THOMAS R

Address 11250 OLD ST. AUGUSTINE RD.

# 15-393

City-State-Zip: JACKSONVILLE FL 32257

SIGNATURE: THOMAS R. HOUSE

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.

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

04/29/2017

FILED Apr 29, 2017

**Secretary of State** 

CC6708791991

Date