

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000181305

Entity Name: 6565HND7, LLC

Current Principal Place of Business:

11655 PHILIPS HWY
JACKSONVILLE, FL 32256

Current Mailing Address:

11655 PHILIPS HWY
JACKSONVILLE, FL 32256 US

FEI Number: 47-2396155

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DENTI, KEVIN A ESQ.
2180 IMMOKALEE RD.
SUITE #316
NAPLES, FL 34110 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: KEVIN A DENTI, ESQ

04/16/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	FOX, JAMES SCOTT	Name	BAUER, CHRITOPHER W
Address	11655 PHILIPS HWY	Address	11655 PHILIPS HWY
City-State-Zip:	JACKSONVILLE FL 32256	City-State-Zip:	JACKSONVILLE FL 32256

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: JAMES SCOTT FOX

AMBR

04/16/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date