

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000073194

Entity Name: UTOPIA LIVING LLC

Current Principal Place of Business:

7230 LEM TURNER CIRCLE
JACKSONVILLE, FL 32208

Current Mailing Address:

P.O.BOX 9007
JACKSONVILLE, FL 32208 US

FEI Number: 47-3410005

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORTES, PATRICIA D
7230 LEM TURNER CIRCLE
JACKSONVILLE, FL 32208 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: PATRICIA FORTES

01/19/2025

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name FORTES, PATRICIA D
Address 7230 LEM TURNER CIRCLE
City-State-Zip: JACKSONVILLE FL 32208

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: PATRICIA FORTES

MGR

01/19/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date