

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000109261

Entity Name: SUJA ART AND WELLNESS LLC

Current Principal Place of Business:

1105 PHELPS STREET
JACKSONVILLE, FL 32206

Current Mailing Address:

1105 PHELPS STREET
JACKSONVILLE, FL 32206

FEI Number: 47-4385258

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PICKETT, SUZANNE M
1105 PHELPS STREET
JACKSONVILLE, FL 32206 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name ROBERTS, RAMONA V
Address 11811 BRADDOCK ROAD
City-State-Zip: JACKSONVILLE FL 32219

Title MGR
Name NELSON, KIMBERLY S
Address 6527 HARMON HILLS CIRCLE
City-State-Zip: JACKSONVILLE FL 32222

Title AUTHORIZED MEMBER
Name HARRELL, JAMES JR.
Address 1105 PHELPS STREET
City-State-Zip: JACKSONVILLE FL 32206

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: RAMONA ROBERTS

MANAGER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date