

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000153610

**Entity Name:** MORRIS SOUTHEAST, LLC

**Current Principal Place of Business:**

2220 COUNTY RD 210 WEST  
SUITE 108-328  
JACKSONVILLE, FL 32259

**Current Mailing Address:**

2220 COUNTY RD 210 WEST  
STE 108-328  
JACKSONVILLE, FL 32259

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MORRIS, ROBERT  
2220 COUNTY RD 210 WEST  
STE 108-328  
JACKSONVILLE, FL 32259 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            AMBR  
Name            MORRIS, ROBERT  
Address        2220 COUNTY RD 210 WEST, STE 108  
                  -328  
City-State-Zip: JACKSONVILLE FL 32259

*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:** ROBERT MORRIS

**MEMBER**

**02/03/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date