	5 5			
KASRAEIAN, ADI 4040 ALCAZAR A JACKSONVILLE,	VENUE			
The above named e	ntity submits this statement for the purpose of changing its re	gistered office or re	gistered agent, or both, in th	e State of Florida.
SIGNATURE:	ADDIE L KASRAEIAN			02/27/2025
	Electronic Signature of Registered Agent			Date
Authorized Pe	erson(s) Detail :			
Title	AMBR	Title	AMBR	

Title	AMBR	Title	AMBR
Name	KASRAEIAN, ALI	Name	KASRAEIAN, ADDIE
Address	4040 ALCAZAR AVENUE	Address	4040 ALCAZAR AVENUE
City-State-Zip:	JACKSONVILLE FL 32207	City-State-Zip:	JACKSONVILLE FL 32207

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: ADDIE KASRAEIAN

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L17000046319

Entity Name: AKC JACKSONVILLE, L.L.C.

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

4040 ALCAZAR AVENUE JACKSONVILLE, FL 32207

Current Mailing Address:

4040 ALCAZAR AVENUE JACKSONVILLE, FL 32207 US

FEI Number: 82-0670541

Name and Address of Current Registered Agent:

OWNER

02/27/2025 Date

FILED Feb 27, 2025 Secretary of State 7245011196CC

Certificate of Status Desired: No