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: DEBRA KLEIN

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000100014

Entity Name: BARBER KLEIN - FORESIGHT JV, LLC

Current Principal Place of Business:

7254 GOLDEN WINGS ROAD, SUITE 9 JACKSONVILLE, FL 32244

Current Mailing Address:

7254 GOLDEN WINGS ROAD, SUITE 9 JACKSONVILLE, FL 32244 US

FEI Number: 36-4867357

Name and Address of Current Registered Agent:

KLEIN, DEBRA 7254 GOLDEN WINGS ROAD, SUITE 9 JACKSONVILLE, FL 32244 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	: DEBRA KLEIN			01/11/2024
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	SEGARRA, JUAN MR	Name	KLEIN, DEBRA	
Address	7254 GOLDEN WINGS ROAD, SUITE 9	Address	7254 GOLDEN WINGS ROAD, SUITE 9	
City-State-Zip:	JACKSONVILLE FL 32244	City-State-Zip:	JACKSONVILLE FL 32244	

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 11, 2024 Secretary of State 3795784511CC

Certificate of Status Desired: No

01/11/2024

MANAGING MEMBER