

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000123354

Entity Name: FLOATING S SQUARED ENTERPRISE, LLC**Current Principal Place of Business:**1754 MORO AVE.
JACKSONVILLE, FL 32207**Current Mailing Address:**1754 MORO AVE.
JACKSONVILLE, FL 32207**FEI Number:** 82-1790008**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FLOTTMAN, KENNETH R
1754 MORO AVE
JACKSONVILLE, FL 32207 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:** KENNETH R FLOTTMAN

03/25/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :Title AMBR
Name STEIN, PAUL
Address 606 RUE MAUPESANT
City-State-Zip: OCEAN SPRINGS MS 39564Title AMBR
Name STOREY, DAVID M
Address 3502 REDWOOD AVE
City-State-Zip: OCEAN SPRINGS MS 39564Title AMBR
Name FLOTTMAN, LISA C
Address 1754 MOROR AVE
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: LISA FLOTTMAN

MEMBER

03/25/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date