

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000217952

Entity Name: PABLO HOLDINGS, LLC

Current Principal Place of Business:

4310 PABLO OAKS CT.
JACKSONVILLE, FL 32224

Current Mailing Address:

4310 PABLO OAKS CT.
JACKSONVILLE, FL 32224 US

FEI Number: 82-3224782

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OKO, SCOTT A
4310 PABLO OAKS CT.
JACKSONVILLE, FL 32224 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 ESTUARY, LLC
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title P
Name O'STEEN, ROGER M
Address 4314 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VPT
Name FRANCIS, HARRY D
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VPAS
Name RAY, RICHARD T
Address 4314 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name DAVIS, JED V
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name OKO, SCOTT A
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name BARBOUR, GREGORY J.
Address 4314 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name MUHL, E. JOSEPH JR.
Address 4314 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

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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: JUDY MORGAN

SECRETARY

02/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title S
Name MORGAN, JUDY B
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name PRITCHARD, ROBERT H
Address 4310 PABLO OAKS CT.
City-State-Zip: JACKSONVILLE FL 32224