

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000069205

**Entity Name:** JCLA LLC

**Current Principal Place of Business:**

11193 SAINT JOHNS INDUSTRIAL PARKWAY N  
JACKSONVILLE, FL 32246

**Current Mailing Address:**

11193 SAINT JOHNS INDUSTRIAL PARKWAY N  
JACKSONVILLE, FL 32246 US

**FEI Number:** 82-4871868

**Certificate of Status Desired:** No

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

CARTER, WILLIAM J  
11193 SAINT JOHNS INDUSTRIAL PARKWAY N  
JACKSONVILLE, FL 32246 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 CARTER, WILLIAM J  
Address 11193 SAINT JOHNS INDUSTRIAL  
PARKWAY N  
City-State-Zip: JACKSONVILLE FL 32246

*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:** WILLIAM CARTER

**OWNER/PRES.**

**06/08/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date