

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000204948

**Entity Name:** REDBIRD FAMILY, LLC

**Current Principal Place of Business:**

8243 GARDEN VIEW CT  
JACKSONVILLE, FL 32256

**Current Mailing Address:**

8243 GARDEN VIEW CT  
JACKSONVILLE, FL 32256 US

**FEI Number:** 83-1982681

**Certificate of Status Desired:** No

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

BELL, KIMBERLY D  
8243 GARDEN VIEW CT  
JACKSONVILLE, FL 32256 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 AP  
Name BELL, KIMBERLY D  
Address 8243 GARDEN VIEW CT  
City-State-Zip: JACKSONVILLE FL 32256

Title AP  
Name BELL, BRIAN T  
Address 8243 GARDEN VIEW CT  
City-State-Zip: JACKSONVILLE FL 32256

Title AP  
Name WOLFSON, JORDAN D  
Address 8243 GARDEN VIEW CT  
City-State-Zip: JACKSONVILLE FL 32256

*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:** BRIAN T. BELL

COLONEL (RET)

02/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date