

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000270973

**Entity Name:** INN OF JAX LLC

**Current Principal Place of Business:**

3696 WEST US HWY 90  
LAKE CITY, FL 32055

**Current Mailing Address:**

3696 WEST US HWY 90  
LAKE CITY, FL 32055 US

**FEI Number:** 83-2643179

**Certificate of Status Desired:** No

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

KELLEY D. JONES. P.A.  
4110 NW 37TH PLACE, SUITE B  
GAINESVILLE, FL 32606 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:** KELLEY JONES

03/25/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           PATEL, NILESH  
Address        3696 WEST US HWY 90  
City-State-Zip: LAKE CITY FL 32055

Title           MANAGER  
Name           PATEL, PRAVIN J  
Address        3696 WEST US HWY 90  
City-State-Zip: LAKE CITY FL 32055

*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:** NILESH PATEL

MANAGER

03/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date