## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000214296

Entity Name: HAILSURE, LLC

**Current Principal Place of Business:** 

3219 32ND WAY

WEST PALM BEACH, FL 33407

**Current Mailing Address:** 

PO BOX 3198

BLUFFTON, SC 29910 US

FEI Number: 84-2918863 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DUER, RICHARD A 3219 32ND WAY WEST PALM BEACH, FL 33407 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

FILED Apr 12, 2023

**Secretary of State** 

1572824639CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name DUER, RICHARD A Name ROSE, BRIAN D
Address 3219 32ND WAY Address P.O. BOX 3198

City-State-Zip: WEST PALM BEACH FL 33407 City-State-Zip: BLUFFTON SC 29910

Title AMBR

Name GROFF, KENNETH R

Address P.O. BOX 3198

City-State-Zip: BLUFFTON SC 29910

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: DUER, RICHARD A

**AMBR** 

04/12/2023