

2022 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

Authorized Person(s) Detail :

Title AMBR
Name DUER, RICHARD A
Address 3219 32ND WAY
City-State-Zip: WEST PALM BEACH FL 33407

Title AMBR
Name ROSE, BRIAN D
Address P.O. BOX 3198
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: ROSE , BRIAN D

AMBR

04/12/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date