

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000248750

Entity Name: JASON KOHN ROTH IRA, LLC

Current Principal Place of Business:

8389 RIVIERA AVE
FT. MYERS, FL 33919

Current Mailing Address:

8389 RIVIERA AVE
FT. MYERS, FL 33919 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ST. CLAIR, RONALD
709 CAPE CORAL PARKWAY WEST
CAPE CORAL, FL 33914 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 KOHN, JASON
Address 8389 RIVIERA AVE
City-State-Zip: FT. MYERS FL 33919

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: JASON KOHN

OWNER

03/12/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date