

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000095989

**Entity Name:** SAMUEL HAROLD JEPSEN LLC

**Current Principal Place of Business:**

6590 CEDAR STREET  
MILTON, FL 32570

**Current Mailing Address:**

6590 CEDAR STREET  
MILTON, FL 32570

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

JEPSEN, SAMUEL H  
6590 CEDAR STREET  
MILTON, FL 32570 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 JEPSEN, SYLVIA K  
Address 7402 LITTLE CREEK WAY  
City-State-Zip: PACE FL 32571

*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:** SYLVIA K JEPSEN

**MANAGER**

**01/03/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date