

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000149715

**Entity Name:** ASHLEY STAUFFER, LLC

**Current Principal Place of Business:**

1704 HENDRICKS AVE  
JACKSONVILLE, FL 32207

**Current Mailing Address:**

4453 SWILCAN BRIDGE LANE NORTH  
JACKSONVILLE, FL 32224

**FEI Number:** 85-0996285

**Certificate of Status Desired:** No

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

STAUFFER, LAUREN A  
4453 SWILCAN BRIDGE LANE NORTH  
JACKSONVILLE, FL 32224 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 STAUFFER, LAUREN A  
Address 4453 SWILCAN BRIDGE LANE NORTH  
  
City-State-Zip: JACKSONVILLE FL 32224

*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:** LAUREN STAUFFER

**OWNER**

**02/04/2021**

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

\_\_\_\_\_  
Date