

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000206589

Entity Name: MULTIFAMILY PARTNERS JAX, LLC

Current Principal Place of Business:

1819 GOODWIN ST
JACKSONVILLE, FL 32204

Current Mailing Address:

1819 GOODWIN ST
JACKSONVILLE, FL 32204 US

FEI Number: 85-2161800

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, CHRISTIAN
1819 GOODWIN ST
JACKSONVILLE, FL 32204 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 ALLEN, CHRISTIAN
Address 1819 GOODWIN ST
City-State-Zip: JACKSONVILLE FL 32204

Title MGR
Name LEONE, GEORGE
Address 1819 GOODWIN ST
City-State-Zip: JACKSONVILLE FL 32204

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: CHRISTIAN ALLEN

MANAGER

01/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date