

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000325113

Entity Name: AXTRAHAND FINANCIAL SERVICES, LLC

Current Principal Place of Business:

7749 NORMANDY BLVD
SUITE 121-513
JACKSONVILLE, FL 32221

Current Mailing Address:

7749 NORMANDY BLVD
SUITE 121-513
JACKSONVILLE, FL 32221 US

FEI Number: 85-3445356

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAMES, RICHARD D IV
2640 KOHN RD
JACKSONVILLE, FL 32210 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 JAMES, RICHARD
Address 2640 KOHN RD
City-State-Zip: JACKSONVILLE FL 32210

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: RICHARD JAMES

MANAGER

04/16/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date