

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000354315

Entity Name: KEYSTONE SUPPORT SERVICES LLC

Current Principal Place of Business:

10135 GATE PARKWAY NORTH
1516
JACKSONVILLE, FL 32246

Current Mailing Address:

10135 GATE PARKWAY NORTH
1516
JACKSONVILLE, FL 32246 US

FEI Number: 85-1822250

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHERMAN, REGINA
10135 GATE PARKWAY NORTH
1516
JACKSONVILLE, FL 32246 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 SHERMAN, REGINA F
Address 10135 GATE PARKWAY NORTH, 1516
City-State-Zip: JACKSONVILLE FL 32246

Title AUTHORIZED MEMBER
Name SHERMAN, REGINA F
Address 10135 GATE PARKWAY NORTH
1516
City-State-Zip: JACKSONVILLE FL 32246

Title AUTHORIZED REPRESENTATIVE
Name LANIER, REGINALD ANDRE'
Address 10135 GATE PARKWAY NORTH
1516
City-State-Zip: JACKSONVILLE FL 32246

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: REGINA SHERMAN

MGR

04/09/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date