

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000392772

Entity Name: DISABLED VETERAN OWNED LLC

Current Principal Place of Business:

1301 RIVERPLACE BLVD
STE 800 DESK WS4
JACKSONVILLE, FL 32207

Current Mailing Address:

1317 EDGEWATER DR
SUITE #1848
ORLANDO, FL 32804 US

FEI Number: 85-4395414

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

DISABLED VETERAN OWNED HOLDINGS LLC
1317 EDGEWATER DR
SUITE #1848
ORLANDO, FL 32804 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 DISABLED VETERAN OWNED HOLDINGS LLC
Address 1317 EDGEWATER DR SUITE # 1848
City-State-Zip: ORLANDO FL 32804

Title AUTHORIZED MEMBER
Name HAGEN, MICHAEL OVERTON
Address 1317 EDGEWATER DR SUITE #1848
City-State-Zip: ORLANDO FL 32804

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: MICHAEL HAGEN

MEMBER

03/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date