

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000299658

Entity Name: 6550 US 1 NORTH, LLC

Current Principal Place of Business:

6550 US 1 NORTH
SAINT AUGUSTINE, FL 32095

Current Mailing Address:

44 MAGNOLIA DUNES CIRCLE
SAINT AUGUSTINE, FL 32080 US

FEI Number: 87-1738404

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOUR LEAF TAX & BOOKKEEPING LLC
50 BASSETT LN
PALM COAST, FL 32137 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 AMBR
Name GANNON, LAUREN
Address 44 MAGNOLIA DUNES CIRCLE
City-State-Zip: SAINT AUGUSTINE FL 32080

Title AMBR
Name WEEKS, SCHAFFER
Address 14 WHITE ST W
City-State-Zip: SAINT AUGUSTINE FL 32080

Title AMBR
Name WEEKS, JACQUELYN
Address 14 WHITE ST W
City-State-Zip: SAINT AUGUSTINE FL 32080

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 GANNON

AMBR

02/22/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date