

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000460364

**Entity Name:** JMR III LLC

**Current Principal Place of Business:**

50 LEANNI WAY  
SUITE E2  
PALM COAST, FL 32137

**Current Mailing Address:**

50 LEANNI WAY  
SUITE E2  
PALM COAST, FL 32137 US

**FEI Number:** 87-3271011

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

YOUNG, STERLING  
50 LEANNI WAY  
SUITE E2  
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 BARRICK, WILLIAM R  
Address 21 CEDARWOOD CT  
City-State-Zip: PALM COAST FL 32137

Title AMBR  
Name HANSEN, MICHAEL  
Address 29 COLUMBUS CT  
City-State-Zip: PALM COAST FL 32137

Title AMBR  
Name YOUNG, JOSEPH  
Address PO BOX 9  
City-State-Zip: CISSNA PARK IL 60924

Title AMBR  
Name YOUNG, STERLING  
Address 50 LEANNI WAY  
SUITE E2  
City-State-Zip: PALM COAST FL 32137

*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:** STERLING YOUNG

AMBR

01/24/2022

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date