

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000313739

Entity Name: KAPLANS COVERING LLC

Current Principal Place of Business:

1923 SUNRISE DR
JACKSONVILLE, FL 32246

Current Mailing Address:

1923 SUNRISE DR
JACKSONVILLE, FL 32246

FEI Number: 88-3291699

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAPLAN, DANIEL S JR.
1923 SUNRISE DR.
JACKSONVILLE,FLORIDA, 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 AP
Name KAPLAN, DANIEL S JR
Address 1923 SUNRISE DR
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: DANIEL KAPLAN

OWNER/OPERATOR

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date