## **2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000483182

Entity Name: KENDAL OWEN LLC

**Current Principal Place of Business:** 

4712 MARSH HAMMOCK DR W JACKSONVILLE, FL 32224

**Current Mailing Address:** 

4712 MARSH HAMMOCK DR W JACKSONVILLE, FL 32224 US

FEI Number: 88-4299662 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OWEN, KENDAL 4712 MARSH HAMMOCK DR W JACKSONVILLE, FL 32224 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

FILED Feb 02, 2023

**Secretary of State** 

5156096480CC

## Authorized Person(s) Detail:

Title MGR

Name OWEN, KENDAL

Address 4712 MARSH HAMMOCK DR W

City-State-Zip: JACKSONVILLE FL 32224

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: KENDAL OWEN 02/02/2023