

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000038777

Entity Name: SS UNLIMITED ENTERPRISES LLC

Current Principal Place of Business:

4651 SALISBURY RD
SUITE 400
JACKSONVILLE, FL 32256

Current Mailing Address:

P. O BOX 49306
JACKSONVILLE, FL 32240 US

FEI Number: 86-1548660

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FLORIDA REGISTERED AGENTS
7901 4TH ST N
SUITE 300
ST PETERSBURG, FL 33702 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: BILL HARVE

04/19/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name SLOAN, SHAMARA
Address P O BOX 49306
City-State-Zip: JACKSONVILLE BEACH FL 32240

Title MANAGER
Name SLOAN, B MICHAEL
Address P. O BOX 49306
City-State-Zip: JACKSONVILLE BEACH FL 32240

Title AUTHORIZED MEMBER
Name SLOAN, ASIA
Address P. O BOX 49306
City-State-Zip: JACKSONVILLE BEACH FL 32240

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: SHAMARA SLOAN

MANAGER

04/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date