

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000331889

**Entity Name:** JEFF ELON,LLC

**Current Principal Place of Business:**

1203 WALDEN DRIVE  
FORT MYERS, FL 33901

**Current Mailing Address:**

8595 COLLEGE PARKWAY  
SUITE 350  
FORT MYERS, FL 33919 US

**FEI Number:** 87-1828622

**Certificate of Status Desired:** No

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

FOXX, JUSTIN  
1203 WALDEN DRIVE  
FORT MYERS, FL 33901 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 MGR

Name FOXX, JUSTIN

Address 1203 WALDEN DRIVE

City-State-Zip: FORT MYERS FL 33901

*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:** JUSTIN FOXX

MGR

07/11/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date