that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY FEINBERG

Electronic Signature of Signing Authorized Person(s) Detail

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000380578

Entity Name: NORTH FLORIDA HOMESTEAD SUPPLY, LLC

Current Principal Place of Business:

2604 BOSTON HWY MONTICELLO. FL 32344

Current Mailing Address:

2604 BOSTON HWY MONTICELLO, FL 32344

FEI Number: 88-4030437

Name and Address of Current Registered Agent:

FEINBERG, JEFFREY 2604 BOSTON HWY MONTICELLO, FL 32344 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

Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	FEINBERG, JEFFREY	Name	THORNTON, JOHN
Address	2604 BOSTON HWY	Address	2427 ADDISON RD
City-State-Zip:	MONTICELLO FL 32344	City-State-Zip:	HOUSTON TX 77030

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

AMBR

01/29/2023

FILED Jan 29, 2023 Secretary of State 6598140216CC

Date

Certificate of Status Desired: No

Date