

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000031668

**Entity Name:** NORTHLAKE 20, LLC

**Current Principal Place of Business:**

15551 OKEECHOBEE BOULEVARD  
LOXAHATCHEE, FL 33470

**Current Mailing Address:**

15551 OKEECHOBEE BOULEVARD  
LOXAHATCHEE, FL 33470

**FEI Number:** 20-1087138

**Certificate of Status Desired:** Yes

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

BASILE, ALDO  
15551 OKEECHOBEE BOULEVARD  
LOXAHATCHEE, FL 33470 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	MGRM	Title	MANAGER
Name	BASILE, ALDO	Name	BASILE, CARLO A
Address	15551 OKEECHOBEE BOULEVARD	Address	15551 OKEECHOBEE BOULEVARD
City-State-Zip:	LOXAHATCHEE FL 33470	City-State-Zip:	LOXAHATCHEE FL 33470

*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:** CARLO BASILE

**MANAGER**

**03/30/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date