

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000002327

Entity Name: 4 POINT OF OCALA, LLC

Current Principal Place of Business:

4349 SE 20TH ST
OCALA, FL 34471

Current Mailing Address:

4349 SE 20TH ST
OCALA, FL 34471 US

FEI Number: 26-1696133

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FABIAN, MATTHEW P
4349 SE 20TH ST
OCALA, FL 34471 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 MANAGER
Name FABIAN, MATTHEW P
Address 4349 SE 20TH ST
City-State-Zip: OCALA FL 34471

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: MATTHEW P FABIAN

MGR

01/03/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date