

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000080338

**Entity Name:** 3624 DEL PRADO LLC

**Current Principal Place of Business:**

3624 DEL PRADO BLVD  
SUITE D  
CAPE CORAL, FL 33904

**Current Mailing Address:**

PO BOX 100501  
CAPE CORAL, FL 33910 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

REICHERT, TIMOTHY  
3624 DEL PRADO BLVD  
SUITE D  
CAPE CORAL, FL 33904 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:** TIMOTHY REICHERT

01/11/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name TRAKHTENBERG, MICHAEL  
Address 3624 DEL PRADO BLVD S  
SUITE B  
City-State-Zip: CAPE CORAL FL 33904

Title MGR  
Name REICHERT, TIMOTHY  
Address PO BOX 100501  
City-State-Zip: CAPE CORAL FL 33910

*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:** TIMOTHY REICHERT

MANAGING MEMBER

01/11/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date