

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000133234

Entity Name: 4223 DEL PRADO LLC

Current Principal Place of Business:

2819 SW 46TH ST
CAPE CORAL, FL 33914

Current Mailing Address:

PO BOX 100501
CAPE CORAL, FL 33910

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CALELLO, MARIJO
2819 SW 46TH ST
CAPE CORAL, FL 33914 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 MEMBER
Name TIM REICHERT
Address PO BOX 100501
City-State-Zip: CAPE CORAL FL 33910

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

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 E REICHERT

MEMBER

03/03/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date