

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000071622

**Entity Name:** CFL M303 LLC

**Current Principal Place of Business:**

694 W END AVE  
UNIT # 1  
CLIFFSIDE PARK, NJ 07010

**Current Mailing Address:**

694 W END AVE  
UNIT # 1  
CLIFFSIDE PARK, NJ 07010

**FEI Number:** 46-5748758

**Certificate of Status Desired:** No

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

SPEKTOR, ARKADIY  
501 NE 14 AVE  
APT.#306  
HALLANDALE, FL 33009 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 MGR  
Name SLAVIN, MAKSIM  
Address 694 W END AVE, UNIT #1  
City-State-Zip: CLIFFSIDE PARK NJ 07010

Title MGR  
Name SLAVIN, POLINA  
Address 694 W END AVE, UNIT #1  
City-State-Zip: CLIFFSIDE PARK NJ 07010

*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:** MAKSIM SLAVIN

**MGR**

**01/21/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date