

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000195597

Entity Name: MA SQUARED, LLC**Current Principal Place of Business:**2701 S OCEAN BLVD
12
HIGHLAND BEACH, FL 33487**Current Mailing Address:**2710 S OCEAN BLVD
12
HIGHLAND BEACH, FL 33487 US**FEI Number:** 47-2737076**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ABRAMS, JOY L
2701 S OCEAN BLVD
12
HIGHLAND BEACH, FL 33487 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:** JOY ABRAMS

03/17/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	ABRAMS, JOY L
Address	2701 S OCEAN BLVD 12
City-State-Zip:	HIGHLAND BEACH FL 33487

Title	MGR
Name	ABRAMS, ROBERT G
Address	2701 S OCEAN BLVD 12
City-State-Zip:	HIGHLAND BEACH FL 33487

Title	MGR
Name	ABRAMS, DANA M
Address	17886 MONTE VISTA DR.
City-State-Zip:	BOCA RATON FL 33496

Title	MGR
Name	COHEN, STEPHEN D
Address	17886 MONTE VISTA DR.
City-State-Zip:	BOCA RATON FL 33496

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: JOY ABRAMS**MANAGER**

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date