

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000045105

Entity Name: 509 20TH AVE N LLC

Current Principal Place of Business:

4095 STATE ROAD 7
SUITE L-106
WELLINGTON, FL 33449

Current Mailing Address:

4095 STATE ROAD 7
SUITE L-106
WELLINGTON, FL 33449

FEI Number: 61-1757512

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRABS, DOMENICA
4095 STATE ROAD 7
SUITE L-106
WELLINGTON, FL 33449 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 CARRABS, DOMENICA
Address 4095 STATE ROAD 7 SUITE L-106
City-State-Zip: WELLINGTON FL 33449

Title MGR
Name CARRABS, MICHAEL
Address 4095 STATE ROAD 7 SUITE L-106
City-State-Zip: WELLINGTON FL 33449

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: DOMENICA CARRABS

MGR

04/27/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date