

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000081175

**Entity Name:** 1123 27TH AVENUE WEST, LLC

**Current Principal Place of Business:**

2751 NORTH RYE ROAD  
PARRISH, FL 34219

**Current Mailing Address:**

2751 NORTH RYE ROAD  
PARRISH, FL 34219

**FEI Number:** 47-4324190

**Certificate of Status Desired:** No

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

SPIVEY, BART  
2751 NORTH RYE ROAD  
PARRISH, FL 34219 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 MBR  
Name SPIVEY, BART  
Address 2751 NORTH RYE ROAD  
City-State-Zip: PARRISH FL 34219

Title MBR  
Name SPIVEY, LEVI  
Address 2609 NORTH RYE ROAD  
City-State-Zip: PARRISH FL 34219

*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:** LEVI SPIVEY

**MANAGING MEMBER**

**01/28/2020**

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

\_\_\_\_\_  
Date