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: ROSS KOTKIN	MEMBER	06/29/2020				

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: 209 TOWNSEND PLACE LLC

Current Principal Place of Business:

3522 PRESERVE DRIVE ATLANTA, GA 30339

Current Mailing Address:

3522 PRESERVE DRIVE ATLANTA GA 30339 US

FEI Number: 47-4011057

Name and Address of Current Registered Agent:

KOTKIN, ROSS 8000 SW 117 AVE PH-A MIAMI, FL 33183 US

I

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:	ROSS KOTKIN			06/29/2020	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	AMBR	Title	AMBR		
Name	KOTKIN, ROSS	Name	ANTENBERG, GARY		
Address	3522 PRESERVE DRIVE	Address	330 CHESTNUT DRIVE		
City-State-Zip:	ATLANTA GA 30339	City-State-Zip:	ROSLYN NY 11576		

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Date

FILED Jun 29, 2020 Secretary of State 8377544934CC

Certificate of Status Desired: No