## 2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000115798

Entity Name: 9020 MASTER LEASE, LLC

**Current Principal Place of Business:** 

2950 TAMIAMI TRAIL NORTH **SUITE #200** 

NAPLES, FL 34103

## **Current Mailing Address:**

2950 TAMIAMI TRAIL NORTH **SUITE #200** NAPLES, FL 34103 US

FEI Number: 47-4504501 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DENTI, KEVIN A ESQ 2180 IMMOKALEE RD #316 NAPLES, FL 34110 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: KEVIN A DENTI, ESQ 10/04/2016

Electronic Signature of Registered Agent

Date

**FILED** Oct 04, 2016

**Secretary of State** 

CR1956562042

## Authorized Person(s) Detail:

Title MGR

CIOFFI, RALPH R JR Name

Address 2950 TAMIAMI TRAIL NORTH

**SUITE #200** 

SIGNATURE: RALPH R CIOFFI, JR

City-State-Zip: NAPLES FL 34103

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.

**MGR** 

Electronic Signature of Signing Authorized Person(s) Detail

10/04/2016

Date