

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000198786

**Entity Name:** NOVA FOUR, LLC

**Current Principal Place of Business:**

330 DOLIAS CT.  
CORAL GABLES, FL 33143

**Current Mailing Address:**

330 DOLIAS CT.  
CORAL GABLES, FL 33143

**FEI Number:** 47-5671122

**Certificate of Status Desired:** No

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

WAKEMAN, GLEN R  
330 DOLIAS CT.  
CORAL GABLES, FL 33143 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 WAKEMAN, GLEN R  
Address 330 DOLIAS CT.  
City-State-Zip: CORAL GABLES FL 33143

*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:** GLEN R WAKEMAN

**REGISTERED AGENT**

**04/29/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date