

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000012732

Entity Name: 209 BUTLER ST LLC**Current Principal Place of Business:**C/O MIRSKY & ASSOC.
2 BLUE HILL PLAZA, POB 1571
PEARL RIVER, NY 10965**Current Mailing Address:**C/O MIRSKY & ASSOC.
2 BLUE HILL PLAZA, POB 1571
PEARL RIVER, NY 10965 US**FEI Number:** 81-2026647**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CAPITOL CORPORATE SERVICES, INC.
515 EAST PARK AVENUE 2ND FL
TALLAHASSEE, FL 32301 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:** KRISTA ABAIR, ASSISTANT SECRETARY ON BEHALF OF CAPITOL

07/30/2021

CORPORATE SERVICES, INC.
Electronic Signature of Registered Agent

Date**Authorized Person(s) Detail :**

Title	MGR	Title	AUTHORIZED REPRESENTATIVE
Name	M&A PROPERTIES OF NY LLC	Name	MIRSKY, ELLIS RICHARD ESQ.
Address	C/O MIRSKY & ASSOC. 2 BLUE HILL PLAZA, POB 1571	Address	TWO BLUE HILL PLAZA P.O. BOX 1571 SECOND FLOOR
City-State-Zip:	PEARL RIVER NY 10965	City-State-Zip:	PEARL RIVER NY 10965

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: ELLIS RICHARD MIRSKY, ESQ.**AUTHORIZED
REPRESENTATIVE**

07/30/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date