

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000128312

**Entity Name:** MADISON AVE VENTURES OF FLORIDA, LLC

**Current Principal Place of Business:**

8 MADISON AVE.  
TOMS RIVER, NJ 08753

**Current Mailing Address:**

8 MADISON AVE.  
TOMS RIVER, NJ 08753 US

**FEI Number:** 81-3800652

**Certificate of Status Desired:** Yes

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MANAGER

Name PASCHON, NOELLE

Address 8 MADISON AVE

City-State-Zip: TOMS RIVER NJ 08753

*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:** NOELLE PASCHON

**MANAGING MEMBER**

**04/24/2020**

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

\_\_\_\_\_  
Date