

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000141569

Entity Name: PARK KING LLC**Current Principal Place of Business:**221 W HALLANDALE BEACH BLVD
SUITE # 341
HALLANDALE, FL 33009**Current Mailing Address:**221 W HALLANDALE BEACH BLVD
SUITE # 341
HALLANDALE, FL 33009 US**FEI Number:** 81-3462298**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SALINAS, ROBERT
221 W HALLANDALE BEACH BLVD
SUITE # 341
HALLANDALE, FL 33009 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 MGRM
Name ASTRUP, RONALD C
Address THE PEARL, 9 SOMERSET LANE,
UNIT 204
City-State-Zip: EDGEWATER NJ 07020Title MGRM
Name ASTRUP, RONALD C
Address 1111 OLD GRIFFIN ROAD
City-State-Zip: DANIA BEACH FL 33004Title MGRM
Name ASTRUP, RYAN
Address 70 POLLARD ROAD
City-State-Zip: MOUNTAIN LAKES NJ 07046Title MGRM
Name ASTRUP, GARY L
Address 8640 TAMARACK AVE
City-State-Zip: SUN VALLEY CA 91352Title MGRM
Name ASTRUP, ROSS
Address 12 OAKDALE ST
City-State-Zip: WINDERMERE FL 34786Title MGRM
Name LAWRENCE, COLIN H
Address 200 LESLIE DR APT 420
City-State-Zip: HALLANDALE FL 33009

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: RONALD C ASTRUP ASTRUP**MANAGING MEMBER****04/07/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date