

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000146313

**Entity Name:** CODE.FRAL LLC**Current Principal Place of Business:**8020 NW 101ST AVE  
TAMARAC, FL 33321**Current Mailing Address:**8020 NW 101ST AVE  
TAMARAC, FL 33321 US**FEI Number:** 81-3935195**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCEVOY, GRACIELA  
8020 NW 101ST AVE  
TAMARAC, FL 33321 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:** GRACIELA MCEVOY

03/17/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GRANIER, FRANCOIS  
Address 34 RUE DE LA FIGAIRASSE  
City-State-Zip: MONTPELLIER 34000

Title MGR  
Name MCEVOY, GRACIELA  
Address 8020 NW 101 AV  
City-State-Zip: TAMARAC FL 33321

Title AMBR  
Name GRANIER, DELPHINE  
Address 34 RUE DE LA FIGAIRASSE  
City-State-Zip: MONTPELLIER, FR 34000

Title AMBR  
Name GRANIER, ALBANE  
Address 34 RUE DE LA FIGAIRASSE  
City-State-Zip: MONTPELLIER, FR 34000

Title AMBR  
Name GRANIER, CONSTANCE  
Address 34 RUE DE LA FIGAIRASSE  
City-State-Zip: MONTPELLIER, FR 34000

*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:** GRACIELA MCEVOY

MANAGER

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date