

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000184934

**Entity Name:** 47 GULFSIDE, LLC

**Current Principal Place of Business:**

2859 PACES FERRY ROAD SE  
SUITE 1140  
ATLANTA, GA 30339

**Current Mailing Address:**

2859 PACES FERRY ROAD SE  
SUITE 1140  
ATLANTA, GA 30339 US

**FEI Number:** 81-4017931

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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           ROGERS, TY  
Address        2859 PACES FERRY ROAD SE  
                  SUITE 1140  
City-State-Zip: ATLANTA GA 30339

*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:** TY ROGERS

**MANAGER**

**02/26/2021**

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

\_\_\_\_\_  
Date