

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000192649

**Entity Name:** 4285 STATE ROAD 60 WEST, LLC

**Current Principal Place of Business:**

15429 N FLORIDA AVE  
TAMPA, FL 33613

**Current Mailing Address:**

15429 N FLORIDA AVE  
TAMPA, FL 33613 US

**FEI Number: 81-4190751**

**Certificate of Status Desired: No**

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

GREGORY LAW FIRM, P.L.  
3801 PARK STREET NORTH  
SUITE #3  
ST. PETERSBURG, FL 33709 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	Title	MANAGER
Name	GHANNAD, HAMID	Name	GHANNAD, SARA
Address	15429 N FLORIDA AVE	Address	15429 N FLORIDA AVE
City-State-Zip:	TAMPA FL 33613	City-State-Zip:	TAMPA FL 33613

*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: HAMID GHANNAD**

**MANAGER**

**04/13/2021**

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

\_\_\_\_\_  
Date