

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000021973

Entity Name: 2209 STATE ROAD, LLC

Current Principal Place of Business:

4521 LENMORE STREET
ORLANDO, FL 32812

Current Mailing Address:

4521 LENMORE STREET
ORLANDO, FL 32812 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEARLMAN, CRAIG S
2 SOUTH ORANGE AVENUE
5TH FLOOR
ORLANDO, FL 32801 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 MGR
Name COMBS, MARK
Address 4521 LENMORE STREET
City-State-Zip: ORLANDO FL 32812

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: MARK COMBS

MANAGER

04/30/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date