## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000065673

Entity Name: CXCI LLC

## **Current Principal Place of Business:**

3510 KRAFT ROAD SUITE 200 NAPLES, FL 34105

**Current Mailing Address:** 

3510 KRAFT RD **STE 200** NAPLES, FL 34105 US

FEI Number: 82-0938260 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

O'RIORDAN, THOMAS M 3510 KRAFT RD STE 200 NAPLES, FL 34105 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: THOMAS O'RIORDAN 02/18/2020

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title **AMBR** 

O'RIORDAN, THOMAS M Name

3510 KRAFT ROAD Address

SUITE 200

SIGNATURE: THOMAS O'RIORDAN

City-State-Zip: NAPLES FL 34105

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.

Electronic Signature of Signing Authorized Person(s) Detail

**PRESIDENT** 

02/18/2020

**FILED** Feb 18, 2020

**Secretary of State** 

7427859221CC

Date