

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000142556

**Entity Name:** 209 MALLORY CT LLC

**Current Principal Place of Business:**

2150 COVE LANE  
WESTON, FL 33326

**Current Mailing Address:**

2150 COVE LANE  
WESTON, FL 33326 US

**FEI Number:** 82-2086003

**Certificate of Status Desired:** No

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

PARJUS, MARIA  
1535 N PARK DR.  
SUITE 104  
WESTON, FL 33326 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	Title	MGR
Name	GORIN, GIULIANA	Name	VISENTIN, LUCIANO
Address	2150 COVE LANE	Address	2150 COVE LANE
City-State-Zip:	WESTON FL 33326	City-State-Zip:	WESTON FL 33326

*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:** GORIN, GIULIANA

**MANAGER**

**04/02/2019**

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

\_\_\_\_\_  
Date