

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000035814

Entity Name: ALPHABET CITY VENTURES, LLC

Current Principal Place of Business:

201 NORTH FRANKLIN STREET, STE 2000
TAMPA, FL 33609

Current Mailing Address:

201 NORTH FRANKLIN STREET, STE 2000
TAMPA, FL 33609 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOODWIN, III, JAMES W
201 NORTH FRANKLIN STREET, STE 2000
TAMPA, FL 33602 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 | MGNT | Title | MGNT |
| Name | GOODWIN, III, JAMES W | Name | SIEGEL, NATHAN A |
| Address | 201 NORTH FRANKLIN STREET, STE 2000 | Address | 4007 SWANN AVE |
| City-State-Zip: | TAMPA FL 33602 | City-State-Zip: | TAMPA FL 33609 |

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: NATHAN A SIEGEL

MANAGER

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date