

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000040123

**Entity Name:** COTTONWOOD COMMERCIAL PROPERTIES LLC

**Current Principal Place of Business:**

505 E. JACKSON ST.  
STE 305-538  
TAMPA, FL 33602

**Current Mailing Address:**

505 E. JACKSON ST.  
STE 305-538  
TAMPA, FL 33602 US

**FEI Number:** 82-4423106

**Certificate of Status Desired:** No

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

STREETMAN LAW  
505 E. JACKSON ST.  
STE 305  
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:** MORGAN W STREETMAN FOR STREETMAN LAW

04/07/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FULL SPECTRUM BEHAVIOR ANALYSIS LLC  
Address 16414 LAKE CHURCH DR  
City-State-Zip: ODESSA FL 33556

Title MGR  
Name STREETMAN, CARROLL E JR  
Address 16414 LAKE CHURCH DR  
City-State-Zip: ODESSA FL 33556

Title AMBR  
Name STREETMAN, CARROLL E  
Address 16414 LAKE CHURCH DR  
City-State-Zip: ODESSA FL 33556

Title AMBR  
Name STREETMAN, JANICE W  
Address 16414 LAKE CHURCH DR  
City-State-Zip: ODESSA FL 33556

*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:** CARROLL E STREETMAN

MGR

04/07/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date