

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000215442

**Entity Name:** 2122 SMYER AVENUE, LLC

**Current Principal Place of Business:**

5420 JERICHO AVE.  
NORTH PORT, FL 34288

**Current Mailing Address:**

5420 JERICHO AVE.  
NORTH PORT, FL 34288 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DLF REGISTERED AGENT SERVICE, LLC  
10181 SIX MILE CYPRESS PKWY  
STE. C  
FORT MYERS, FL 33966 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	KOVACS, CHARLES J	Name	KOVACS, ORSOLYA
Address	5420 JERICHO AVE.	Address	5420 JERICHO AVE.
City-State-Zip:	NORTH PORT FL 34288	City-State-Zip:	NORTH PORT FL 34288

*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:** KOVACS , CHARLES J

**MGR**

**03/26/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date