

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000061000

**Entity Name:** IMH 4 LLC

**Current Principal Place of Business:**

3351 COVERED BRIDGE DR EAST  
DUNEDIN, FL 34698

**Current Mailing Address:**

3351 COVERED BRIDGE DR EAST  
DUNEDIN, FL 34698 US

**FEI Number:** 83-3929388

**Certificate of Status Desired:** No

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

LEONE, VALENTINA  
3351 COVERED BRIDGE DR EAST  
DUNEDIN, FL 34698 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  
Name TIBALDO, MIRCO A  
Address 3351 COVERED BRIDGE DR EAST  
City-State-Zip: DUNEDIN FL 34698

Title MGR  
Name TIMORI, DAVIDE  
Address 330 3RD ST S UNIT 1604  
City-State-Zip: ST PETERSBURG FL 33701

Title MGR  
Name LEONE, VALENTINA  
Address 3351 COVERED BRIDGE DR EAST  
City-State-Zip: DUNEDIN FL 34698

Title MGR  
Name ANGILERI, VALENTINA  
Address 330 3RD ST S UNIT 1604  
City-State-Zip: ST PETERSBURG FL 33701

Title AUTHORIZED MEMBER  
Name FOLLOWTHESUN LLC  
Address 330 3RD ST S UNIT 1604  
City-State-Zip: ST PETERSBURG FL 33701

Title AUTHORIZED MEMBER  
Name TIMA USA INC  
Address 3351 COVERED BRIDGE DR EAST  
City-State-Zip: DUNEDIN FL 34698

*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:** DAVIDE TIMORI

MBR

03/18/2020

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

\_\_\_\_\_ Date