

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000087820

Entity Name: 1565 CITY LLC**Current Principal Place of Business:**8200 CYPRESS PLAZA DR,
UNIT 408
JACKSONVILLE, FL 32256**Current Mailing Address:**3631 BROOKWALL DRIVE
STE 101
FAIRLAWN, OH 44333 US**FEI Number:** 83-4280365**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KELLY, TIMOTHY P P.A.
1016 LASALLE STREET
JACKSONVILLE, FL 32207 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	MBR
Name	HUNTER, MATTHEW
Address	3631 BROOKWALL DRIVE, STE 101
City-State-Zip:	FAIRLAWN OH 44333

Title	MGR
Name	DUNNELL, GREGORY DAVID
Address	3631 BROOKWALL DRIVE STE 101
City-State-Zip:	FAIRLAWN OH 44333

Title	MGR
Name	MATTHEW J. GRETZ LIVING TRUST DATED MAY 31, 2017
Address	3631 BROOKWALL DRIVE STE 101
City-State-Zip:	FAIRLAWN OH 44333

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: MATTHEW HUNTER**MEMBER****01/27/2023**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date