

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000173332

Entity Name: 4 PLAY AVIATION LLC

Current Principal Place of Business:

45 LAZY EIGHT DR.
PORT ORANGE, FL 32128

Current Mailing Address:

45 LAZY EIGHT DR.
PORT ORANGE, FL 32128

FEI Number: 30-9468678

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TURNER, BRUCE F
45 LAZY EIGHT DR.
PORT ORANGE, FL 32128 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 TURNER, BRUCE F
Address 45 LAZY EIGHT DR.
City-State-Zip: PORT ORANGE FL 32128

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: BRUCE FTURNER

MGR

01/14/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date