

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000220464

**Entity Name:** 4119 NORTH, LLC

**Current Principal Place of Business:**

423 BAYVIEW PKWY  
NOKOMIS, FL 34275

**Current Mailing Address:**

423 BAYVIEW PKWY  
NOKOMIS, FL 34275 US

**FEI Number:** 84-3004962

**Certificate of Status Desired:** No

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

CORBRIDGE, C.KELLEY  
1314 E VENICE AVE STE D  
VENICE, FL 34285 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	SALLAPUDI, NITIN	Name	SALLAPUDI, NEETHA
Address	423 BAYVIEW PKWY	Address	423 BAYVIEW PKWY
City-State-Zip:	NOKOMIS FL 34275	City-State-Zip:	NOKOMIS FL 34275

*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:** NITIN SALLAPUDI

**MANAGER**

**04/15/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date