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.

MGRM

SIGNATURE: LINDSEY HARRIS

Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# **Current Principal Place of Business:**

Entity Name: 4620 NORTH 42ND BLK LLC

301 W PLATT ST SUITE 114 TAMPA, FL 33506

## **Current Mailing Address:**

DOCUMENT# L19000240697

301 W PLATT ST SUITE 114 TAMPA, FL 33606 US

## FEI Number: 84-3238545

## Name and Address of Current Registered Agent:

HARRIS, LINDSEY 301 W PLATT ST SUITE 114 TAMPA, FL 33506 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	: LINDSEY HARRIS			06/23/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	MGRM	
Name	CASTILLO, ELVIRA	Name	HARRIS, LINDSEY	
Address	301 W PLATT ST SUITE 114	Address	301 W PLATT ST SUITE 114	
City-State-Zip:	TAMPA FL 33506	City-State-Zip:	TAMPA FL 33506	

FILED Jun 23, 2020 Secretary of State 1491044238CC

Certificate of Status Desired: No

06/23/2020