

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000047637

**Entity Name:** 420MERIDIAN LLC

**Current Principal Place of Business:**

420 MERIDIAN PLACE  
TALLAHASSEE, FL 32303

**Current Mailing Address:**

420 MERIDIAN PLACE  
TALLAHASSEE, FL 32303 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

KRINZMAN, ESQ, RICHARD N  
169 EAST FLAGLER STREET  
STE. 500  
MIAMI, FL 33131 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            | ANGLETON, JAMES JR   | Name            | ANGLETON, CONNIE D   |
| Address         | 420 MERIDIAN PLACE   | Address         | 420 MERIDIAN PLACE   |
| City-State-Zip: | TALLAHASSEE FL 32303 | City-State-Zip: | TALLAHASSEE FL 32303 |

*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:** JAMES ANGLETON

**MANAGER**

**04/15/2023**

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

\_\_\_\_\_  
Date