## **2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000124616

Entity Name: AILERON HUDSON LLC

Current Principal Place of Business:

3401 WEST CYPRESS ST SUITE 201

TAMPA. FL 33647

**Current Mailing Address:** 

3401 WEST CYPRESS ST SUITE 201 TAMPA. FL 33647

FEI Number: 85-0968533 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEARD, ROBERT K 3401 WEST CYPRESS ST SUITE 201 TAMPA, FL 33647 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

Authorized Person(s) Detail:

Title AUTHORIZED REPRESENTATIVE Title AUTHORIZED REPRESENTATIVE

Name BEARD, ROBERT K Name SALEMI, CHRIS D

Address 3401 WEST CYPRESS ST SUITE 201 Address 3401 WEST CYPRESS ST SUITE 201

City-State-Zip: TAMPA FL 33647 City-State-Zip: TAMPA FL 33647

Title AUTHORIZED MEMBER
Name AILERON HOLDINGS, LLC

Address 3401 WEST CYPRESS ST SUITE 201

City-State-Zip: TAMPA FL 33647

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: ROBERT K. BEARD

AUTHORIZED REPRESENTATIVE 04/27/2021

Date

FILED Apr 27, 2021

**Secretary of State** 

6094779496CC

Electronic Signature of Signing Authorized Person(s) Detail

Date