

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000211804

**Entity Name:** TAYLOR BERKOWITZ, LLC

**Current Principal Place of Business:**

105 OAK SHADOW PL.  
ST. JOHNS, FL 32259

**Current Mailing Address:**

105 OAK SHADOW PL.  
ST. JOHNS, FL 32259 US

**FEI Number:** 86-3929937

**Certificate of Status Desired:** Yes

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

BERKOWITZ, TAYLOR M  
105 OAK SHADOW PL.  
ST. JOHNS, FL 32259 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            MANAGER  
Name            BERKOWITZ, TAYLOR  
Address        105 OAK SHADOW PL.  
City-State-Zip: ST. JOHNS FL 32259

Title            AUTHORIZED REPRESENTATIVE  
Name            BERKOWITZ, ROBERT  
Address        105 OAK SHADOW PL.  
City-State-Zip: ST. JOHNS FL 32259

*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:** TAYLOR BERKOWITZ

MANAGER

03/06/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date