# SIGNATURE: SCOTT KLEIMAN

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L21000253543

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: THROUGH HIS GRACE 4 LLC

#### **Current Principal Place of Business:**

6511 NOVA DR SUITE 171 DAVIE, FL 33317

### **Current Mailing Address:**

6511 NOVA DR SUITE 171 DAVIE, FL 33317 US

## FEI Number: 87-1504224

## Name and Address of Current Registered Agent:

KLEIMAN, M. SCOTT 7320 GRIFFIN ROAD SUITE 109 DAVIE, FL 33314 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 MGR MASTERY DEVELOPMENT LLC Name 6511 NOVA DR, SUITE 171 Address City-State-Zip: DAVIE FL 33314

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.

# REGISTERED AGENT

Certificate of Status Desired: No

03/29/2022

Date

FILED Mar 29, 2022 Secretary of State 4120947097CC