

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000483524

**Entity Name:** 319 NW BYRON ST. LLC

**Current Principal Place of Business:**

6077 NW 71 TERRACE  
PARKLAND, FL 33067

**Current Mailing Address:**

6077 NW 71 TERRACE  
PARKLAND, FL 33067 US

**FEI Number:** 87-3812261

**Certificate of Status Desired:** No

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

MOHAMMED, FAZEED  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** FAZEED MOHAMMED

01/06/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                    |                 |                    |
|-----------------|--------------------|-----------------|--------------------|
| Title           | AMBR               | Title           | AMBR               |
| Name            | MOHAMMED, FAZEED   | Name            | MOHAMMED, MARIA    |
| Address         | 6077 NW 71 TERRACE | Address         | 6077 NW 71 TERRACE |
| City-State-Zip: | PARKLAND FL 33067  | City-State-Zip: | PARKLAND FL 33067  |

*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:** FAZEED MOHAMMED

OWNER

01/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date