

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000523936

Entity Name: ATJ-N1071A, LLC

Current Principal Place of Business:

2390 TAMIAMI TRAIL NORTH, SUITE #204
NAPLES, FL 34103

Current Mailing Address:

2390 TAMIAMI TRAIL NORTH, SUITE #204
NAPLES, FL 34103

FEI Number: 87-4419658

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLY, CHARLES M JR.
2390 TAMIAMI TRAIL NORTH, SUITE #204
NAPLES, FL 34103 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 AMBR
Name WILKINSON, JOHN
Address 2390 TAMIAMI TRAIL NORTH, SUITE #204
City-State-Zip: NAPLES FL 34103

Title MGR
Name WILKINSON, JOHN
Address 2390 TAMIAMI TRAIL NORTH, SUITE #204
City-State-Zip: NAPLES FL 34103

Title AMBR
Name GUTIERREZ, ANDRES
Address 2390 TAMIAMI TRAIL NORTH, SUITE #204
City-State-Zip: NAPLES FL 34103

Title MGR
Name GUTIERREZ, ANDRES
Address 2390 TAMIAMI TRAIL NORTH, SUITE #204
City-State-Zip: NAPLES FL 34103

Title AUTHORIZED MEMBER
Name PARENT, THOMAS E
Address 2390 TAMIAMI TRAIL NORTH, SUITE #204
City-State-Zip: NAPLES FL 34103

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: JOHN H WILKINSON

MANAGER

02/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date