

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000077885

**Entity Name:** 101 GAINES 42 FL LLC

**Current Principal Place of Business:**

519 WEST GAINES ST  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

2224 UPLAND WAY  
TALLAHASSEE, FL 32311

**FEI Number: 88-0886359**

**Certificate of Status Desired: No**

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

PATEL, NILAY  
2224 UPLAND WAY  
TALLAHASSEE, FL 32311 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 MGRM  
Name PATEL, NILAY  
Address 2224 UPLAND WAY  
City-State-Zip: TALLAHASSEE FL 32311

Title MGRM  
Name PATEL, RAVI  
Address 2224 UPLAND WAY  
City-State-Zip: TALLAHASSEE FL 32311

Title MGRM  
Name PATEL, HEPIN  
Address 8066 SILVERADO DR  
City-State-Zip: COLUMBUS GA 31909

Title MGRM  
Name PATEL, JIGAR  
Address 1501 BRANDYWINE WAY  
City-State-Zip: DALTON GA 30720

Title MGRM  
Name PATEL, MANISH  
Address 8176 PRESERVATION TRL  
City-State-Zip: MIDLAND GA 31820

Title MGRM  
Name PATEL, AMIT  
Address 6903 CONGRESS ST  
City-State-Zip: NEW PORT RICHEY FL 34653

Title MGRM  
Name USA, 101 HOLDING LLC  
Address 6903 CONGRESS ST,  
City-State-Zip: NEW PORT RICHEY FL 34653

*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: NILAY PATEL**

**MANAGING DIRECTOR**

**01/24/2023**

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date