

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000297119

**Entity Name:** AJI FOWLER LLC

**Current Principal Place of Business:**

2540 E FOWLER AVE  
TAMPA, FL 33612

**Current Mailing Address:**

500 E KENNEDY BLVD  
TAMPA, FL 33602 US

**FEI Number:** 88-3062732

**Certificate of Status Desired:** No

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

LIEBERMAN, ADAM  
500 E KENNEDY BLVD  
TAMPA, FL 33602 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	MGR	Title	MBR
Name	AJI HOLDINGS DHC, LLC	Name	AJI VENTURES DHC, LLC
Address	500 E KENNEDY BLVD	Address	500 E KENNEDY BLVD
City-State-Zip:	TAMPA 33602	City-State-Zip:	TAMPA FL 33602

*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:** ADAM LIEBERMAN

**MEMBER**

**01/18/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date