

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000160609

**Entity Name:** 3622 N GARRISON ST 33619, LLC

**Current Principal Place of Business:**

1445 WOODMONT LN. NW. #1910  
ATLANTA, GA 30318

**Current Mailing Address:**

1445 WOODMONT LN. NW. #1910  
ATLANTA, GA 30318 US

**FEI Number:** 92-3918254

**Certificate of Status Desired:** No

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

REGISTERED AGENT SOLUTIONS, INC.  
2894 REMINGTON GREEN LANE  
SUITE A  
TALLAHASSEE, FL 32308 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	AMBR
Name	PS TKH 01, LLC	Name	PS TKH 01, LLC
Address	1445 WOODMONT LN. NW. #1910	Address	1445 WOODMONT LN. NW. #1910
City-State-Zip:	ATLANTA GA 30318	City-State-Zip:	ATLANTA GA 30318

*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:** CHARLES GROSSE

**AUTHORIZED PERSON**

**04/23/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date