

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L94000000008

Entity Name: M. G. LARRK TWO, L.C.**Current Principal Place of Business:**201 ALHAMBRA CIRCLE
SUITE 514
CORAL GABLES, FL 33134**Current Mailing Address:**201 ALHAMBRA CIRCLE
SUITE 514
CORAL GABLES, FL 33134 US**FEI Number:** 65-0568689**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KRONGOLD, M. RONALD
201 ALHAMBRA CIRCLE
SUITE 514
CORAL GABLES, FL 33134 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	KRONGOLD, M. RONALD
Address	201 ALHAMBRA CIRCLE SUITE 514
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	KRONGOLD, GLENDA
Address	201 ALHAMBRA CIRCLE SUITE 514
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	KRONGOLD, RANDI M
Address	201 ALHAMBRA CIRCLE SUITE 514
City-State-Zip:	CORAL GABLES FL 33134

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: KRONGOLD, M. RONALD

MGR

03/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date