

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000003870

Entity Name: COUNTYLINE BUILDING 4 LLC

Current Principal Place of Business:

700 NW 1ST AVENUE, SUITE 1620
MIAMI, FL 33136

Current Mailing Address:

700 NW 1ST AVENUE, SUITE 1620
MIAMI, FL 33136 US

FEI Number: 32-0548187

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
700 NW 1ST AVENUE, SUITE 1620
MIAMI, FL 33136 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 P
Name SUTTON, CHRISTOPHER
Address 700 NW 1ST AVE
SUITE 1620
City-State-Zip: MIAMI FL 33132

Title VP,S
Name COBB, KOLLEEN O.P.
Address 700 NW 1ST AVE
SUITE 1620
City-State-Zip: MIAMI FL 33136

Title VP,T
Name GODOY, JUAN (RUSTY)
Address 700 NW 1ST AVE
SUITE 1620
City-State-Zip: MIAMI FL 33136

Title VP,AS
Name MARTINEZ, MARGARITA M
Address 700 NW 1ST AVE
SUITE 1620
City-State-Zip: MIAMI FL 33136

Title VP
Name ANDERSON, MAURICIO H
Address 700 NW 1ST AVE
SUITE 1620
City-State-Zip: MIAMI FL 33136

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: KOLLEEN O.P. COBB

VICE PRESIDENT

05/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date