

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000082548

**Entity Name:** NISAIR MARKET STREET, L.L.C.

**Current Principal Place of Business:**

3700 SOUTH US HWY 1  
FORT PIERCE, FL 34982

**Current Mailing Address:**

3700 SOUTH US HWY 1  
FORT PIERCE, FL 34982

**FEI Number:** 20-4417685

**Certificate of Status Desired:** Yes

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

MULROONEY, CHRISTINE N  
3700 SOUTH US HWY 1  
FORT PIERCE, FL 34982 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 NISA, PHILIP JR.  
Address 3700 SOUTH US HWY 1  
City-State-Zip: FORT PIERCE FL 34982

Title MGRM  
Name NISA MULROONEY, CHRISTINE  
Address 3700 SOUTH US HWY 1  
City-State-Zip: FORT PIERCE FL 34982

Title MGRM  
Name NISA, PHILIP SR.  
Address 3700 SOUTH US HWY 1  
City-State-Zip: FORT PIERCE FL 34982

Title MGRM  
Name NISA, PATRICIA  
Address 3700 SOUTH US HWY 1  
City-State-Zip: FORT PIERCE FL 34982

*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:** CHRISTINE NISAMULROONEY

**MANAGING MEMBER**

**01/28/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date