

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000116032

**Entity Name:** BUTTERS CAPITAL IV, LLC

**Current Principal Place of Business:**

6820 LYONS TECH CIR  
#100  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

6820 LYONS TECH CIR  
#100  
COCONUT CREEK, FL 33073

**FEI Number:** 41-2190098

**Certificate of Status Desired:** No

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

BUTTERS, MALCOLM  
6820 LYONS TECH CIR  
SUITE 100  
COCONUT CREEK, FL 33073 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  
Name            BUTTERS, MALCOLM  
Address        6820 LYONS TECH CIR #100  
City-State-Zip: COCONUT CREEK FL 33073

Title            MGR  
Name            BUTTERS, MARK  
Address        6820 LYONS TECH CIR #100  
City-State-Zip: COCONUT CREEK FL 33073

*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:** MALCOLM BUTTERS

**MGR**

**04/26/2017**

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

\_\_\_\_\_  
Date