2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 27, 2021
Secretary of State
3573470623CC

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Entity Name: NACE I. COHEN, CPA, PLLC

Current Principal Place of Business:

9400 FOUNTAIN MEDICAL CT
SUITE B-100
BONITA SPRINGS, FL 34135

Current Mailing Address:

9400 FOUNTAIN MEDICAL CT
SUITE B-100
BONITA SPRINGS, FL 34135 US

FEI Number: 26-0430947

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, NACE I
9400 FOUNTAIN MEDICAL CT
SUITE B-100
BONITA SPRINGS, FL 34135 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: NACE COHEN 04/27/2021

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	COHEN, NACE I	Name	COHEN, CINDY
Address	2137 IMPERIAL CIR	Address	2137 IMPERIAL CIR
City-State-Zip:	NAPLES FL 34110	City-State-Zip:	NAPLES FL 34110

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: NACE I COHEN MANAGER 04/27/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date