

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030886

Entity Name: 4490 ALT 19, LLC

Current Principal Place of Business:

3204 ALTERNATE 19 N
PALM HARBOR, FL 34683

Current Mailing Address:

3204 ALTERNATE 19 N
PALM HARBOR, FL 34683

FEI Number: 26-2270222

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOLLINKA, WOLLINKA & DODDRIDGE, PL
10015 TRINITY BOULEVARD
SUITE 101
TRINITY, FL 34655 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 WIKLE, PAUL J
Address 3204 ALTERNATE 19 N
City-State-Zip: PALM HARBOR FL 34683

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: PAUL J. WIKLE

MANAGER

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date