

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000076789

**Entity Name:** ECM420, LLC

**Current Principal Place of Business:**

12 BOND STREET  
APT 4A  
GREAT NECK, NY 11021

**Current Mailing Address:**

P.O. BOX 4715  
GREAT NECK, NY 11023 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

NEAL S. LITMAN, P.A.  
800 BRICKELL AVENUE, SUITE 1501  
MIAMI, FL 33131 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	Title	MGR
Name	COHENMEHR, ESHAGH	Name	AGHAI, SHEKOUFEH
Address	12 BOND STREET APT 4A	Address	12 BOND STREET APT 4A
City-State-Zip:	GREAT NECK NY 11021	City-State-Zip:	GREAT NECK NY 11021

*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:** ESHAGH COHENMEHR

MGR

04/12/2020

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

\_\_\_\_\_  
Date