

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000118894

**Entity Name:** CAPITAL CITY PEDICABS LLC

**Current Principal Place of Business:**

113 S MONROE STREET  
TALLAHASSEE, FL 32301

**Current Mailing Address:**

113 S MONROE STREET  
TALLAHASSEE, FL 32301 US

**FEI Number:** 90-0896141

**Certificate of Status Desired:** No

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

BRISTOW, MARK  
113 S MONROE STREET  
TALLAHASSEE, FL 32301 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:** MARK BRISTOW

04/06/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name GOLDSTEIN, MICHAEL  
Address 113 S MONROE STREET  
City-State-Zip: TALLAHASSEE FL 32301

*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:** MICHAEL GOLDSTEIN

MGRM

04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date