

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000080367

Entity Name: PROPERTY RUNNER 4 YOU LLC**Current Principal Place of Business:**8900 NW 35TH LANE-UNIT 130
SUITE 438
DORAL, FL 33172**Current Mailing Address:**8900 NW 35TH LANE-UNIT 130
SUITE 438
DORAL, FL 33172 US**FEI Number:** 46-4983836**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIN, JOAN
660 NE 120TH STREET
BISCAYNE PARK, FL 33161 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	MGRM
Name	CHIN LEE, JONATHAN
Address	8900 NW 35TH LANE- UNIT 130 SUITE 438
City-State-Zip:	DORAL FL 33172

Title	MGRM
Name	STRAESSLE-CHIN LEE, JACQUELINE
Address	8900 NW 35TH LANE-UNIT 130 SUITE 438
City-State-Zip:	DORAL FL 33172

Title	MGRM
Name	CHIN LEE, RAYMOND
Address	8900 NW 35TH LANE SUITE 438
City-State-Zip:	DORAL FL 33172

Title	MGRM
Name	JOAN, CHIN
Address	660 NE 120TH STREET
City-State-Zip:	BISCAYNE PARK FL 33161

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: JONATHAN CHIN LEE**MANAGING DIRECTOR****03/10/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date