

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000092168

**Entity Name:** ATHOS IV ENTERPRISES, LLC

**Current Principal Place of Business:**

C/O GERO, EVAUL & MCCLOSKEY  
8551 W SUNRISE BLVD STE 200  
PLANTATION, FL 33322

**Current Mailing Address:**

C/O GERO, EVAUL & MCCLOSKEY  
8551 W SUNRISE BLVD STE 200  
PLANTATION, FL 33322 US

**FEI Number:** 46-3331172

**Certificate of Status Desired:** No

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

GERO, EVAUL & MCCLOSKEY  
8551 W SUNRISE BLVD  
STE 200  
PLANTATION, FL 33322 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	MANAGER	Title	MANAGER
Name	BERLAGOSKY, SHIMON	Name	REIKONNEN, NADEJDA
Address	PO BOX 290696	Address	PO BOX 290696
City-State-Zip:	DAVIE FL 33329	City-State-Zip:	DAVIE FL 33329

*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:** NADEJDA REIKONNEN

**MANAGER**

**05/01/2018**

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

\_\_\_\_\_  
Date