# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000148101

Entity Name: 235 GARDEN LLC

#### **Current Principal Place of Business:**

C/O MCR 1400 E. OAKLAND PARK BLVD. SUITE 207 FORT LAUDERDALE, FL 33334-4400

# **Current Mailing Address:**

C/O MCR 1400 E. OAKLAND PARK BLVD. SUITE 207 FORT LAUDERDALE, FL 33334-4400 US

# FEI Number: NOT APPLICABLE

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

THE IRENE FOUNTAS REVOCABLE TRUST OF 2007 235 GARDEN COURT - UNIT B FT LAUDERDALE, FL 33308-5421 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                     | IRENE FOUNTAS                                      |                 | 03/19/2020   |
|-------------------------------|--|-----------------|--|
|                               | Electronic Signature of Registered Agent           |                 | Date   |
| Authorized Person(s) Detail : |  |                 |  |
| Title                         | MGR  | Title           | MANAGER  |
| Name                          | FOUNTAS, IRENE                                     | Name            | FOUNTAS, PAUL                                      |
| Address                       | C/O MCR<br>1400 E. OAKLAND PARK BLVD. SUITE<br>207 | Address         | C/O MCR<br>1400 E. OAKLAND PARK BLVD. SUITE<br>207 |
| City-State-Zip:               | FORT LAUDERDALE FL 33334-4400                      | City-State-Zip: | FORT LAUDERDALE FL 33334-4400                      |

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 FOUNTAS

PRESIDENT

03/19/2020

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date