

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000146170

**Entity Name:** CITYOS LLC

**Current Principal Place of Business:**

2443 FILLMORE ST  
380-1310  
SAN FRANCISCO, CA 94115

**Current Mailing Address:**

2443 FILLMORE ST  
380-1310  
SAN FRANCISCO, CA 94115 US

**FEI Number:** 47-1870401

**Certificate of Status Desired:** No

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

GODFREY, MARIKO  
3937 90TH AVE EAST  
PARRISH, FL 34219 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	AMBR	Title	AMBR
Name	GODFREY, MONIKA	Name	GAKOVIC, CECO
Address	2443 FILLMORE ST 380-1310	Address	2443 FILLMORE ST 380-1310
City-State-Zip:	SAN FRANCISCO CA 94115	City-State-Zip:	SAN FRANCISCO CA 94115

*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:** MONIKA GODFREY

**MEMBER**

**02/25/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date