

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000189172

**Entity Name:** 79 NW 20TH STREET, LLC

**Current Principal Place of Business:**

79 NW 20TH STREET  
MIAMI , FL 33127

**Current Mailing Address:**

% THE COHEN'S ORGANIZATION  
45 NW 21ST STREET  
MIAMI, FL 33127 US

**FEI Number:** 47-2741752

**Certificate of Status Desired:** No

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

SHEVLIN, BARRY T ESQ.  
SHEVLIN & ATKINS  
1111 KANE CONCOURSE, SUITE 619  
BAY HARBOR ISLANDS, FL 33154 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 COHEN, JOSEPH  
Address 45 NW 21ST STREET  
City-State-Zip: MIAMI FL 33127

*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:** JOSEPH COHEN

**MEMBER**

**01/16/2023**

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

\_\_\_\_\_  
Date