

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000018741

Entity Name: PARALLEL FLORIDA , LLC

Current Principal Place of Business:

2203 N LOIS AVE
M275
TAMPA, FL 33607

Current Mailing Address:

2203 N LOIS AVE
M275
TAMPA, FL 33607 US

FEI Number: 47-3909681

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 EXECUTIVE DIRECTOR
Name WHITCOMB, JAMES
Address 55 IVAN ALLEN JR BLVD NW
9TH FLOOR
City-State-Zip: ATLANTA GA 30308

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: JAMES WHITCOMB

**AUTHORIZED
REPRESENTATIVE**

04/29/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date