# 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: PATRICK MCCARTY

Electronic Signature of Signing Authorized Person(s) Detail

#### **Current Principal Place of Business:** 2246 BAY VILLAGE CT. PALM BEACH GARDENS, FL 33410

Entity Name: 2725 ANZIO CT 304, LLC

## **Current Mailing Address:**

DOCUMENT# L16000018073

2246 BAY VILLAGE CT. PALM BEACH GARDENS. FL 33410 US

### FEI Number: 81-1676767

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

MCCARTY, PATRICK 2246 BAY VILLAGE CT. PALM BEACH GARDENS, FL 33410 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	MCCARTY, PATRICK	Name	MCCARTY, DIANE
Address	2246 BAY VILLAGE CT.	Address	2246 BAY VILLAGE CT.
City-State-Zip:	PALM BEACH GARDENS FL 33410	City-State-Zip:	PALM BEACH GARDENS FL 33410

MGRM

04/12/2021 Date

# 2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Certificate of Status Desired: No

Date