

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000064727

Entity Name: COMMODORE FLORIDA LLC

Current Principal Place of Business:

404 WYMAN STREET, SUITE 400
WALTHAM, MA 02451

Current Mailing Address:

404 WYMAN STREET, SUITE 400
WALTHAM, MA 02451 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TK REGISTERED AGENT, INC.
101 E. KENNEDY BOULEVARD, SUITE 2700
TAMPA, FL 33602 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 MGR
Name ALBANESE, JOSEPH J
Address 404 WYMAN STREET, SUITE 400
City-State-Zip: WALTHAM MA 02451

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 J. ALBANESE

MANAGER

02/06/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date