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.

PRESIDENT

SIGNATURE: ALTHEA M. BENJAMIN

Electronic Signature of Signing Authorized Person(s) Detail

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

1717 E BUSCH BLVD 709 TAMPA, FL 33612

Current Mailing Address:

10929 N 29TH ST TAMPA, FL 33612

FEI Number: 82-2157705

Name and Address of Current Registered Agent:

BENJAMIN, ALTHEA M 10929 N 29TH ST TAMPA, FL 33612 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 MGR	MGR	
Name BENJAMIN, FERGUS D	BENJAMIN, ALTHEA M)
Address 10929 N 29TH ST	10929 N 29TH ST	
City-State-Zip: TAMPA FL 33612	: TAMPA FL 33612	

FILED Jan 22, 2020 Secretary of State 5638403281CC

Date

Certificate of Status Desired: No

01/22/2020 Date