

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000075890

**Entity Name:** DH-127 E ASHLAND ST MORTON IL LLC

**Current Principal Place of Business:**

9710 TRAVILLE GATEWAY DR  
SUITE 105  
ROCKVILLE, MD 20850

**Current Mailing Address:**

9710 TRAVILLE GATEWAY DR  
SUITE 105  
ROCKVILLE, MD 20850 US

**FEI Number:** 82-4912903

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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            MEMBER  
Name            AMAZONIA CONSULTING GROUP,  
Address        299 ALHAMBRA CIRCLE  
                  SUITE 510  
City-State-Zip: CORAL GABLES FL 33134

Title            MEMBER  
Name            FGGF VENTURES LLC  
Address        201 MADEIRA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

*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:** FGGF VENTURES LLC

**MEMBER**

**02/24/2023**

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

\_\_\_\_\_  
Date