

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000143454

Entity Name: FORMAV NAPLES LLC

Current Principal Place of Business:

400 5TH AVE S
305
NAPLES, FL 34102

Current Mailing Address:

PO BOX 9684
NAPLES, FL 34101

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUGGER, JOHN N
600 5TH AVE S
207
NAPLES, FL 34102 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 M
Name FORMAN, CAMILLE
Address 400 5TH AVE S # 305
City-State-Zip: NAPLES FL 34102

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: CAMILLE FORMAN

MGR

04/24/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date