

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000282461

**Entity Name:** TLP SOUTH COBB DR, LLC

**Current Principal Place of Business:**

5400 SOUTH COBB DRIVE SE  
ATLANTA, GA 30339

**Current Mailing Address:**

5400 SOUTH COBB DRIVE SE  
ATLANTA, GA 30339 US

**FEI Number:** 83-2794697

**Certificate of Status Desired:** No

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

A1A REGISTERED AGENT INC.  
5647 110TH AVENUE NORTH  
ROYAL PALM BEACH, FL 33411 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:** TINA MAKI, DP

03/20/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED MEMBER  
Name GRANT, DONALD J  
Address 5400 SOUTH COBB DRIVE SE  
City-State-Zip: ATLANTA GA 30339

Title AMBR  
Name TRAYLOR AND ASSOCIATES, LLC  
Address 100 GULF SHORE DR  
UNIT 309  
City-State-Zip: DESTIN FL 32541

*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:** TRAYLOR AND ASSOCIATES, LLC

AMBR

03/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date