

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000080658

Entity Name: NOVUS MULTIFAMILY SERVICES LLC

Current Principal Place of Business:

7040 SEMINOLE PRATT WHITNEY RD
#25-49
LOXAHATCHEE, FL 33470

Current Mailing Address:

7040 SEMINOLE PRATT WHITNEY RD
#25-49
LOXAHATCHEE, FL 33470 US

FEI Number: 84-5094147

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKOKAN, SCOTT
7040 SEMINOLE PRATT WHITNEY RD
#25-49
LOXAHATCHEE, FL 33470 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 SKOKAN, SCOTT
Address 7040 SEMINOLE PRATT WHITNEY RD
#25-49
City-State-Zip: LOXAHATCHEE FL 33470

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: SCOTT SKOKAN

OWNER

04/10/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date