

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000083037

Entity Name: FL AVION 4, LLC**Current Principal Place of Business:**3244 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310**Current Mailing Address:**3244 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310 US**FEI Number:** 85-1473565**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FL AVIATION HOLDINGS, LLC
3244 CAPITAL CIRCLE SW
TALLAHASSEE, FL 32310 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:** LACEY SMITH

03/31/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name FL AVIATION HOLDINGS, LLC
Address 3244 CAPITAL CIRCLE SW
City-State-Zip: TALLAHASSEE FL 32310

Title AMBR
Name MDCT, LLC
Address 88 PRITCHARD DR
City-State-Zip: PALM COAST FL 32164

Title AR
Name SMITH, LACEY
Address 3244 CAPITAL CIRCLE SW
City-State-Zip: TALLAHASSEE FL 32310

Title AR
Name CELLERIER, DIDIER
Address 88 PRITCHARD DR
City-State-Zip: PALM COAST FL 32164

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: LACEY SMITH

MANAGER

03/31/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date