

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000409116

**Entity Name:** 1278 ALLIGATOR DR, LLC

**Current Principal Place of Business:**

3814 N DRUID HILLS RD  
DECATUR, GA 30030

**Current Mailing Address:**

3814 N DRUID HILLS RD  
DECATUR, GA 30030

**FEI Number:** 87-2671191

**Certificate of Status Desired:** No

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

FLP RA SERVICES LLC  
360 CENTRAL AVE STE 800  
SAINT PETERSBURG, FL 33701 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 WALCHLE, JONATHAN M  
Address 3814 N DRUID HILLS RD  
City-State-Zip: DECATUR GA 30030

*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:** JONATHAN M. WALCHLE

MGR

04/21/2023

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

\_\_\_\_\_ Date