

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002807

**Entity Name:** PPF SS 12000 NW 27TH AVENUE, LLC

**Current Principal Place of Business:**

3384 PEACHTREE ROAD, NE  
SUITE 400  
ATLANTA, GA 30326

**Current Mailing Address:**

3384 PEACHTREE ROAD, NE  
SUITE 400  
ATLANTA, GA 30326 US

**FEI Number:** 20-1422466

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	CEO, AUTHORIZED REPRESENTATIVE	Title	VP, AUTHORIZED REPRESENTATIVE
Name	DEGNER, MARK	Name	CARMICHAEL, BRADFORD
Address	3384 PEACHTREE ROAD, NE SUITE 400	Address	3384 PEACHTREE ROAD, NE SUITE 400
City-State-Zip:	ATLANTA GA 30326	City-State-Zip:	ATLANTA GA 30326
Title	EXECUTIVE VICE PRESIDENT, AUTHORIZED REPRESENTATIVE	Title	VP, AUTHORIZED REPRESENTATIVE
Name	GOONAN, JAMES	Name	LABRIER, ROBERT
Address	1522 OLD COUNTRY ROAD	Address	6371 KEYSTONE STREET
City-State-Zip:	PLAINVIEW NY 11803	City-State-Zip:	PHILADELPHIA PA 19135

*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:** BRADFORD CARMICHAEL

VP CORPORATE  
CONTROLLER

02/24/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date