

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000005355

**Entity Name:** JULIAN LECRAW AND COMPANY, LLC

**Current Principal Place of Business:**

790 MARIETTA ST. NW  
ATLANTA, GA 30318

**Current Mailing Address:**

790 MARIETTA ST. NW  
ATLANTA, GA 30318 US

**FEI Number:** 20-0712656

**Certificate of Status Desired:** No

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

BROOME, STEPHEN D  
822 A1A NORTH STE 208  
PONTE VEDRA BEACH, FL 32082 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	MGRM	Title	MGRM
Name	WALKER, LEE	Name	TOMPKINS, MICHAEL
Address	790 MARIETTA ST. NW	Address	790 MARIETTA ST. NW
City-State-Zip:	ATLANTA GA 30318	City-State-Zip:	ATLANTA GA 30318
Title	MGRM	Title	MEMBER
Name	BROOME, STEPHEN	Name	WEST, ROBERT H
Address	822 A1A NORTH STE 208	Address	790 MARIETTA ST. NW
City-State-Zip:	PONTE VEDRA BEACH FL 32082	City-State-Zip:	ATLANTA GA 30318

*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:** ROBERT H WEST

**MEMBER**

**04/28/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date