

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000011150

Entity Name: FLLKMO01 GOOD 1000 BUSINESS CENTER LLC**Current Principal Place of Business:**1521 WESTBRANCH DR
STE 100
MCLEAN, VA 22102**Current Mailing Address:**1521 WESTBRANCH DR
STE 100
MCLEAN, VA 22102 US**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	PRESIDENT
Name	GLADSTONE, DAVID
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	VP
Name	COOPER, ARTHUR S.
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	VP
Name	TUCKER, MATTHEW
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	VP
Name	FLICKINGER, BRANDON
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	VP
Name	BECKHORN, JAY
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	SECRETARY
Name	CUTLIP, ROBERT
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

Title	TREASURER
Name	SODO, MIKE
Address	1521 WESTBRANCH DR STE 100
City-State-Zip:	MCLEAN VA 22102

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: DAVID GLADSTONE**PRESIDENT****04/26/2021**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date