

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M2100000289

Entity Name: THE ALLMAN COMPANY-MIAMI, LLC

Current Principal Place of Business:

496 W. ANN ARBOR TRAIL
SUITE 204
PLYMOUTH, MI 48170

Current Mailing Address:

496 W. ANN ARBOR TRAIL
SUITE 204
PLYMOUTH, MI 48170 US

FEI Number: 41-2181244

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT 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 | MGR | Title | AP |
| Name | ALLMAN, JOHN M | Name | KREJCAR, LAURA |
| Address | 496 W. ANN ARBOR TRAIL, SUITE 204 | Address | 496 W. ANN ARBOR TRAIL, SUITE 204 |
| City-State-Zip: | PLYMOUTH MI 48170 | City-State-Zip: | PLYMOUTH MI 48170 |
| | | | |
| Title | AP | | |
| Name | ALLMAN, JACK | | |
| Address | 496 W. ANN ARBOR TRAIL, SUITE 204 | | |
| City-State-Zip: | PLYMOUTH MI 48170 | | |

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: LAURA KREJCAR

MGR.

01/28/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date