

**2018 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A16000000680

**Entity Name:** SIX REYNOLDS, LP

**Current Principal Place of Business:**

1518 BROOKHAVEN TRACE NE  
ATLANTA, GA 30319

**Current Mailing Address:**

1518 BROOKHAVEN TRACE NE  
ATLANTA, GA 30319 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

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

REYNOLDS, RUSSELL R  
1518 BROOKHAVEN TRACE NE  
ATLANTA, FL 30319 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

**General Partner Detail :**

Document # L16000215920  
Name FOUR REYNOLDS, LLC  
Address 1518 BROOKHAVEN TRACE NE  
City-State-Zip: ATLANTA GA 30319

*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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** RUSSELL REYNOLDS

**GENERAL PARTNER**

**03/06/2018**

\_\_\_\_\_  
Electronic Signature of Signing General Partner Detail

\_\_\_\_\_  
Date