

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000504259

**Entity Name:** SIXTY90 SPONSOR, LLC

**Current Principal Place of Business:**

1215 N. FRANKLIN STREET  
TAMPA, FL 33602

**Current Mailing Address:**

1215 N. FRANKLIN STREET  
TAMPA, FL 33602

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

ARNOLD, BOWEN A  
1215 FRANKLIN STREET  
TAMPA, FL 33602 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	MGR
Name	DDA-SIXTY90, LLC	Name	BACKSTREETS CAPITAL, LLC
Address	1215 N. FRANKLIN STREET	Address	248 MIRROR LAKE DRIVE
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	ST. PETERSBURG FL 33701

*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:** DDA-SIXTY90, LLC

**MANAGER**

**04/29/2022**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date