#### **2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000007400

Entity Name: LEMONADE MM NORTH FORT MYERS LLC

FILED
Mar 02, 2023
Secretary of State
8126632786CC

## **Current Principal Place of Business:**

1000 MAINE AVENUE, SW, SUITE 300 WASHINGTON, DC 20024

# **Current Mailing Address:**

1000 MAINE AVENUE, SW, SUITE 300 WASHINGTON, DC 20024 US

FEI Number: 88-2137400 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S PINE ISLAND RD 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 AUTHORIZED MEMBER

Name LEMONADE MM TRUIST (I) LLC

Address 1000 MAINE AVENUE, SW, SUITE 300

City-State-Zip: WASHINGTON DC 20024

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: LEMONADE MM TRUIST (I) LLC

**AUTHORIZED MEMBER** 

03/02/2023