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. 04/22/2016

SIGNATURE: JOSE SOL

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

General Partner Detail :

Document # Name SOL. JOSE TRUSTEE Address 11451 SW 104 STREET City-State-Zip: MIAMI FL 33176

2016 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A1500000766

Entity Name: SOLANZ FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

Current Principal Place of Business:

11451 SW 104 STREET MIAMI, FL 33176

Current Mailing Address:

11451 SW 104 STREET MIAMI, FL 33176 US

FEI Number: 81-1031577

Name and Address of Current Registered Agent:

TOLLEY, RACHEL L ESQ 2600 S DOUGLAS ROAD 1008 CORAL GABLES, FL 33134 US

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

Electronic Signature of Signing General Partner Detail

FILED Apr 22, 2016 Secretary of State CC0586679001

Certificate of Status Desired: No

Date