

**2019 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A16000000240

**Entity Name:** HIGGINBOTHAM FAMILY LIMITED LIABILITY LIMITED  
PARTNERSHIP

**FILED**  
**Mar 12, 2019**  
**Secretary of State**  
**1029946156CC**

**Current Principal Place of Business:**

1 GROVE ISLE DRIVE  
BUILING 1, APT 210  
MIAMI, FL 33133

**Current Mailing Address:**

1 GROVE ISLE DRIVE  
BUILING 1, APT 210  
MIAMI, FL 33133 US

**FEI Number: 81-4219182**

**Certificate of Status Desired: No**

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

HIGGINBOTHAM, KATHLEEN  
1 GROVE ISLE DRIVE  
BUILING 1, APT 210  
MIAMI, FL 33133 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:** KATHLEEN HIGGINBOTHAM

03/12/2019

Electronic Signature of Registered Agent

Date

**General Partner Detail :**

Document #

Name HIGGINBOTHAM, KATHLEEN L

Address 1 GROVE ISLE DRIVE  
BUILING 1, APT 210

City-State-Zip: MIAMI FL 33133

*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:** KATHLEEN HIGGINBOTHAM

**MANAGER**

03/12/2019

Electronic Signature of Signing General Partner Detail

Date