## **2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L01000008126

Entity Name: ZORRILLA & ASSOCIATES, P.L.

**Current Principal Place of Business:** 

2655 LE JEUNE RD. SUITE 805-10

CORAL GABLES, FL 33134

## **Current Mailing Address:**

1825 PONCE DE LEON BLVD. UNIT 517 CORAL GABLES, FL 33134 US

FEI Number: 65-1108953 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JUAN C. ZORRILLA, ESQ. 1825 PONCE DE LEON BLVD. UNIT 517 CORAL GABLES, FL 33134 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: JUAN C. ZORRILLA, ESQ 01/26/2015

Electronic Signature of Registered Agent Date

FILED Jan 26, 2015

**Secretary of State** 

CR3926185879

01/26/2015

Date

## Authorized Person(s) Detail:

Title MGRM

Address

Name ZORRILLA, JUAN CESQ.

1825 PONCE DE LEON BLVD. UNIT 517

City-State-Zip: CORAL GABLES FL 33134

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: JUAN C ZORRILLA MGRM

Electronic Signature of Signing Authorized Person(s) Detail