

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000026888

**Entity Name:** 319 APARTMENTS LLC

**Current Principal Place of Business:**

319 SW 11 AVE  
MIAMI, FL 33130

**Current Mailing Address:**

P.O. BOX 56-6622  
MIAMI, FL 33256-6622

**FEI Number:** 20-1025283

**Certificate of Status Desired:** No

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

SEDENO, YVETTE  
8440 SW 119TH STREET  
MIAMI, FL 33156 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  
Name SEDENO, YVETTE  
Address 8440 SW 119 STREET  
City-State-Zip: MIAMI FL 33156

*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:** YVETTE SEDENO

MANAGER

01/22/2016

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

\_\_\_\_\_  
Date