

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000008119

**Entity Name:** 5511 RENE, LLC

**Current Principal Place of Business:**

2605 PONCE DE LEON BLVD.  
CORAL GABLES, FL 33134

**Current Mailing Address:**

P.O. BOX 430097  
PO BOX 430097  
MIAMI, FL 33143 US

**FEI Number:** 20-4300494

**Certificate of Status Desired:** No

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

EDWARD MICHAEL WELLER SR.  
2605 PONCE DE LEON BLVD.  
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:** EDWARD MICHAEL WELLER SR.

04/27/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name TRESCOTT, DRUCKER & VASALLO,  
PLPINES DAVIS, LP  
Address 2605 PONCE DE LEON BLVD.  
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:** EDWARD MICHAEL WELLER, SR.

NANAGER

04/27/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date