## 2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000020987

Entity Name: TYPE GROUP, LLC

singl Blood of Business

## **Current Principal Place of Business:**

201 ALHAMBRA CIRCLE

501

CORAL GABLES, FL 33134

## **Current Mailing Address:**

201 ALHAMBRA CIRCLE

501

CORAL GABLES, FL 33134 US

FEI Number: 20-4928629 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BARED, PABLO RESQ. 201 ALHAMBRA CIRCLE 501

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:

Electronic Signature of Registered Agent

Date

FILED Jan 25, 2023

**Secretary of State** 

9424923705CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name ESKENAZI, MOISES Name ESKENAZI, ISAAC

Address 201 ALHAMBRA CIRCLE Address 201 ALHAMBRA CIRCLE

City-State-Zip: CORAL GABLES FL 33134 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.