## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000020987

Entity Name: TYPE GROUP, LLC

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

201 ALHAMBRA CIRCLE 601 CORAL GABLES, FL 33134

# **Current Mailing Address:**

201 ALHAMBRA CIRCLE 601 CORAL GABLES, FL 33134 US

## FEI Number: 20-4928629

## Name and Address of Current Registered Agent:

BARED, PABLO RESQ. 201 ALHAMBRA CIRCLE 601 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

#### Authorized Person(s) Detail :

Title	MGR	Title	MGR	
Name	ESKENAZI, MOISES	Name	ESKENAZI, ISAAC	
Address	201 ALHAMBRA CIRCLE 601	Address	201 ALHAMBRA CIRCLE 601	
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.

SIGNATURE: MOISES ESKENAZI

MANAGER

08/22/2018

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

Date