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: DALIANA MANTEGAZZA TRUSTEE

Electronic Signature of Signing Authorized Person(s) Detail

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUA	L REPORT

DOCUMENT# L06000031439

Entity Name: SEYBOLD CENTER, LLC

Current Principal Place of Business:

816 NW 11TH STREET SUITE 1-C MIAMI, FL 33136

Current Mailing Address:

816 NW 11TH STREET SUITE 1-C MIAMI, FL 33136

FEI Number: 20-5366443

Name and Address of Current Registered Agent:

LAW OFFICES OF FRYE & ASSOCIATES, PL 20900 W DIXIE HIGHWAY AVENTURA, FL 33180 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	MINERVA VAZQUEZ			04/05/2017	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGRM	Title	MGRM		
Name	DALIANA MANTEGAZZA, TRUSTEE	Name	LEE MARKS, TRUSTEE		
Address	813 NW 11TH STREET, SUITE 1-C	Address	813 NW 11TH STREET, SUITE	1-C	
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136		

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

04/05/2017

FILED Apr 05, 2017 Secretary of State CC6022519564

Certificate of Status Desired: No

Date