## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000047213

Entity Name: 2330 PONCE LLC

**FILED** Jan 26, 2016 **Secretary of State** CC9871017295

**Current Principal Place of Business:** 

1600 PONCE DE LEON BLVD, SUITE 1025

CORAL GABLES. FL 33134

## **Current Mailing Address:**

1600 PONCE DE LEON BLVD, SUITE 1025 CORAL GABLES. FL 33134 US

FEI Number: 20-4967848 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ETTEDGUI, ALBERTO 1600 PONCE DE LEON BLVD, SUITE 1025 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.

Title

Name

Address City-State-Zip: MGR

SUCRE, VERONICA

MIAMI FL 33129

1643 BRICKELL AVE, APT 2305

SIGNATURE:

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGR

SAIDEN, AMIN

1643 BRICKELL AVE, APT 2305

MIAMI FL 33129 City-State-Zip:

Title MGR

Name Address

Name

Address

SAIDEN DE NAVARRO, SILVIA 1643 BRICKELL AVE, APT 2305

City-State-Zip: MIAMI FL 33129

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: AMIN SAIDEN

Electronic Signature of Signing Authorized Person(s) Detail

**OWNER** 

01/26/2016