

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000051168

**Entity Name:** COMMODORE 606 LLC

**Current Principal Place of Business:**

155 OCEAN LANE DR  
# 1204  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

P.O BOX 14-0970  
CORAL GABLES, FL 33114 US

**FEI Number:** 26-0167681

**Certificate of Status Desired:** Yes

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

PRATS FERNANDEZ & CO PA  
999 PONCE DE LEON BLVD  
STE 1110  
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

**Authorized Person(s) Detail :**

Title MGR  
Name CAICEDO, JUAN MARTIN  
Address 155 OCEAN LANE DR # 1204  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR  
Name CAICEDO, SILVIA  
Address 155 OCEAN LANE DR # 1204  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR  
Name CAICEDO DE ROUX, MARIA A  
Address 155 OCEAN LANE DR  
# 1204  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** CAICEDO , SILVIA

MGR

03/21/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date