### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000025868

Entity Name: ABMM 18, LLC

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

4775 COLLINS AVENUE, 1608 MIAMI BEACH, FL 33140

# **Current Mailing Address:**

4775 COLLINS AVENUE, 1608 MIAMI BEACH, FL 33140

## FEI Number: 26-4486898

## Name and Address of Current Registered Agent:

JACK LEVINE PA 3050 BISCAYNE BLVD 302 MIAMI , FL 33137 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:                    | : JACK LEVINE                            |                 | 03/19/2017                      |
|-------------------------------|--|-----------------|---------------------------------|
|                               | Electronic Signature of Registered Agent |                 | Date                            |
| Authorized Person(s) Detail : |  |                 |                                 |
| Title                         | MGRM                                     | Title           | MGRM                            |
| Name                          | ELMANN, MINDY F                          | Name            | SOLOCHOWSKY, ANN F              |
| Address                       | 4775 COLLINS AVENUE, SUITE 1608          | Address         | 4775 COLLINS AVENUE, SUITE 1608 |
| City-State-Zip:               | MIAMI BEACH FL 33140                     | City-State-Zip: | MIAMI BEACH FL 33140            |
| Title                         | MGRM                                     | Title           | MGRM                            |
| THE                           | MORM                                     | 1100            |                                 |
| Name                          | FRIED, MOSES                             | Name            | FRIED, BERNICE                  |
| Address                       | 4775 COLLINS AVENUE, SUITE 1608          | Address         | 4775 COLLINS AVENUE, SUITE 1608 |
| City-State-Zip:               | MIAMI BEACH FL 33140                     | City-State-Zip: | MIAMI BEACH FL 33140            |
|                               |  |                 |                                 |

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.

MGRM

# SIGNATURE: MOSES FRIED

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 19, 2017 Secretary of State CC2776732714

Certificate of Status Desired: No