

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000036793

**Entity Name:** ALYWAY, L.L.C.

**Current Principal Place of Business:**

201 CRANDON BLVD  
APT 1224  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

2655 LEJEUNE ROAD,  
SUITE 316  
CORAL GABLES, FL 33134 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FLORIDA COMPANY REGISTRY INC.  
2655 LEJEUNE ROAD, SUITE 316  
#4C  
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 MGRM  
Name NORTHGARD EQUITIES CORP.  
Address 201 CRANDON BLVD. # 1224  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR  
Name NORIEGA-BENTIN, JAIME  
Address 201 CRANDON BLVD, APT. 1224  
City-State-Zip: KEY BISCAYNE FL 33149

Title AUTHORIZED REPRESENTATIVE  
Name FREED, OWEN S  
Address 2655 LEJEUNE ROAD, SUITE 316  
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:** OWEN S. FREED

**AUTHORIZED  
REPRESENTATIVE**

**04/06/2017**

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

\_\_\_\_\_  
Date