# SIGNATURE: LILIAN LIU CARDENAS

that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

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

# 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: LILIAN LIU CARDENAS

	Electronic Signature of Registered Agent		
Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	LIU CARDENAS, LILIAN	Name	LIU CZARCINSKI, JULIANA
Address	335 S. BISCAYNE BLVD. #3309	Address	335 S. BISCAYNE BLVD. #3309

### FEI Number: 76-8201825

City-State-Zip: MIAMI FL 33131

### Name and Address of Current Registered Agent:

335 S. BISCAYNE BLVD. #3309 MIAMI, FL 33131 US

LIU CARDENAS, LILIAN

335 S. BISCAYNE BLVD. #3309

Entity Name: UNIVERSITY INN 2412, LLC

**Current Principal Place of Business:** 335 S. BISCAYNE BLVD.

#3309 MIAMI, FL 33131

# **Current Mailing Address:**

MIAMI, FL 33131 US

### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L09000065252

FILED Apr 10, 2019 Secretary of State 2440163878CC

> 04/10/2019 Date

### Certificate of Status Desired: No

City-State-Zip: MIAMI FL 33131

MANAGING AGENT

04/10/2019