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	NATHALY TOGANDI			09/09/2021
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	MANAGER	
Name	TOGANDI, NATHALY	Name	FOLCHI, NICOLA	
Address	11385 NW 66TH STREET	Address	11385 NW 66TH STREET	
City-State-Zip:	MIAMI FL 33178	City-State-Zip:	MIAMI FL 33178	

### Name and Address of Current Registered Agent:

TOGANDI, NATHALY 11385 NW 66TH ST MIAMI, FL 33178 US

# 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: NICOLA FOLCHI

MGR

09/09/2021

2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

## DOCUMENT# L10000046543

Entity Name: 502 WIND BY NEO, LLC.

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

11385 NW 66TH ST MIAMI, FL 33178

**Current Mailing Address:** 

11385 NW 66TH ST MIAMI. FL 33178 US

# FEI Number: 68-0680491

Electronic Signature of Signing Authorized Person(s) Detail

FILED Sep 09, 2021 Secretary of State 9101650456CC

Certificate of Status Desired: No

Date