#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000049169

Entity Name: FACE XIII LLC

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

20533 BISCAYNE BLVD. STE. 1234 AVENTURA, FL 33180

## **Current Mailing Address:**

20533 BISCAYNE BLVD **SUITE 1234** AVENTURA, FL 33180

## **FEI Number: NOT APPLICABLE**

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

FELDMAN, ANDREW ESQ 1111 KANE CONCOURSE 209 BAY HARBOR ISLANDS, FL 33154 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

#### Authorized Person(s) Detail -

Authorized Person(s) Detail :				
Title	MANAGING MEMBER	Title	AUTHORIZED MEMBER	
Name	BORUCHOWICZ, ALBERTO	Name	VOVARD CAMARERO, FEDERICO ANTONIO	
Address	20533 BISCAYNE BLVD SUITE 1234	Address	20533 BISCAYNE BLVD SUITE 1234	
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180	

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: BORUCHOWICZ ALBERTO	MGRM	04/21/2017
Electronic Signature of Signing Authorized Pe	erson(s) Detail	Date

# FILED Apr 21, 2017 Secretary of State CC7074616308

Certificate of Status Desired: Yes

Date