# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L11000010975

Entity Name: 739 AURELIA, LLC

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

C/O VINCE MELE & ASSOCIATES 2665 S. BAYSHORE DRIVE, #220 COCONUT GROVE, FL 33133

### **Current Mailing Address:**

C/O VINCE MELE & ASSOCIATES 2665 S. BAYSHORE DRIVE, #220 COCONUT GROVE, FL 33133 US

# FEI Number: NOT APPLICABLE

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

KORNIK, GARY H 20295 N. E. 29 PLACE 200 ADVENTURA, FL 33180 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: GARY H. KORNIK, ESQUIRE

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGRM
Name	JAFFEE, SHELDON
Address	C/O VINCE MELE & ASSOCIATES 2655 S. BAYSHORE DRIVE #220
City-State-Zip:	COCONUT GROVE FL 33133

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: SHELDON JAFFEE

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Jan 25, 2017 Secretary of State CC3179409850

Certificate of Status Desired: No

01/25/2017

MEMBER MANAGER

01/25/2017 Date

Date