

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000044474

**FILED**  
**Apr 26, 2017**  
**Secretary of State**  
**CC2445023069**

**Entity Name:** NATIONAL POOLS OF MIAMI LLC

**Current Principal Place of Business:**

6839 SOUTHWEST 114TH PLACE  
UNIT B  
MIAMI, FL 33173

**Current Mailing Address:**

6839 SOUTHWEST 114TH PLACE  
UNIT B  
MIAMI, FL 33173 US

**FEI Number:** 61-1645868

**Certificate of Status Desired:** Yes

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

IGLESIAS, OVIDIO  
6839 SOUTHWEST 114TH PLACE  
UNIT B  
MIAMI, FL 33173 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 MGR  
Name PINO, MARIA TMGR  
Address 6839 SOUTHWEST 114TH PLACE #B  
City-State-Zip: MIAMI FL 33173

Title MGR  
Name IGLESIAS, OVIDIO  
Address 6839 SOUTHWEST 114TH PLACE #B  
City-State-Zip: MIAMI FL 33186

*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:** MARIA THERESA PINO

**MANAGER**

**04/26/2017**

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

\_\_\_\_\_  
Date