## that my name appears above, or on an attachment with all other like empowered. SIGNATURE: FRANCISCO ROJO

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L11000086130 Entity Name: ROSAL WESTVIEW, LLC

**Current Principal Place of Business:** 

3050 BISCAYNE BLVD. SUITE 300 MIAMI, FL 33137

## **Current Mailing Address:**

3050 BISCAYNE BLVD. SUITE 300 MIAMI, FL 33137 US

## FEI Number: 45-3042118

## Name and Address of Current Registered Agent:

SALAND, ROBERT 3050 BISCAYNE BLVD. SUITE 300 MIAMI, FL 33137 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	ROBERT SALAND			02/06/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	Р	Title	VP	
Name	SALAND, ROBERT F	Name	ROJO, FRANCISCO	
Address	3050 BISCAYNE BLVD. SUITE 300	Address	3050 BISCAYNE BLVD, SUITE 300	
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137	

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

VP

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 06, 2020 Secretary of State 0330051630CC

Certificate of Status Desired: Yes

02/06/2020

Date