

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000087794

FILED
Apr 02, 2019
Secretary of State
5867916254CC

Entity Name: CODINA MULTIFAMILY, LLC

Current Principal Place of Business:

2020 SALZEDO STREET, 5TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2020 SALZEDO STREET, 5TH FLOOR
CORAL GABLES, FL 33134 US

FEI Number: 45-2989009

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROMERO, RAFAEL G
2020 SALZEDO STREET, 5TH FLOOR
CORAL GABLES, FL 33134 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: RAFAEL G ROMERO

04/02/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title: MANAGER & CEO
Name: CODINA, ARMANDO
Address: 2020 SALZEDO STREET, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title: VP, S
Name: BARLICK, ANA-MARIE CODINA
Address: 2020 SALZEDO STREET, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title: P, AS, T
Name: GRAGG, K LAWRENCE
Address: 2020 SALZEDO STREET, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title: RE, AUTHORIZED REPRESENTATIVE
Name: ROMERO, RAFAEL
Address: 2020 SALZEDO STREET, 5TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

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: RAFAEL G ROMERO

**AUTHROIZED
REPRESENTATIVE**

04/02/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date