

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000088444

Entity Name: VILLA MEDICI 803, LLC

Current Principal Place of Business:

1033 NE 17 WAY #803
FT. LAUDERDALE, FL 33304

Current Mailing Address:

1600 JAY STREET
ROCHESTER, NY 14611

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANDEL, PAUL ESQ
10115 WEST SAMPLE ROAD
CORAL SPRINGS, FL 33065 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 MGRM
Name FERRAUILO, JOSEPH D
Address 1600 JAY STREET
City-State-Zip: ROCHESTER NY 14611

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: JOSEPH FERRAUILO

OWNER

03/09/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date