## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000095682

**Entity Name:** YS ALLIANCE DEVELOPMENT LLC

**Current Principal Place of Business:** 

1201 E PONCE DE LEON, APT 206 CORAL GABLES. FL 33134

**Current Mailing Address:** 

1201 E PONCE DE LEON, APT 206 CORAL GABLES. FL 33134 US

FEI Number: 39-2078585 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ARIAS, BETSY 1201 E PONCE DE LEON, APT 206 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: BETSY ARIAS 04/24/2019

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MANAGER Title AUTHORIZED REPRESENTATIVE

JAIEB, SAMIR Name B RYAN, JOSEPH Name 8925 SW 148TH ST Address

1201 E PONCE DE LEON, APT 206 Address SUITE 200

City-State-Zip: CORAL GABLES FL 33134

City-State-Zip: MIAMI FL 33176

Title **AUTHORIZED REPRESENTATIVE** 

Name ARIAS, BETSY

Address 1201 E PONCE DE LEON, APT 206

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.

04/24/2019 SIGNATURE: SAMIR JAIEB **MANAGER** 

**FILED** Apr 24, 2019

**Secretary of State** 

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