## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000098729

Entity Name: AGRILAJO, LLC

**Current Principal Place of Business:** 

290 NW 165TH ST, PH5 MIAMI, FL 33169

**Current Mailing Address:** 

**3137 NE 163RD STREET** 

NORTH MIAMI BEACH, FL 33160 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANAGER SERVICES LLC 3137 NE 163RD STREET MIAMI, FL 33160 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: MARIANO SAAL 02/09/2018

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **AMBR** Title AMBR

PEREZ, ALEJANDRO G Name PEREZ, ALEJANDRO A Name Address Address 290 NW 165TH ST, PH5 290 NW 165TH ST, PH5

City-State-Zip: MIAMI FL 33169 MIAMI FL 33169 City-State-Zip:

Title **AMBR** Title **AMBR** 

Name FIDALGO DE PEREZ, MARIA T PEREZ FIDALGO, YAMILA A Name

Address 290 NW 165TH ST, PH5 Address 290 NW 165TH ST, PH5

MIAMI FL 33169 City-State-Zip: City-State-Zip: MIAMI FL 33169

Title **MANAGER** 

MANAGER SERVICES, LLC Name **3137 NE 163RD STREET** Address

NORTH MIAMI BEACH FL 33160 City-State-Zip:

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: MANAGER SERVICES, LLC

**MANAGER** 

02/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

**FILED** Feb 09, 2018

**Secretary of State** 

CC7497592398

Date