

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000103972

**Entity Name:** NPV PROPERTY MANAGEMENT, LLC

**Current Principal Place of Business:**

5200 BLUE LAGOON DRIVE  
SUITE 400  
MIAMI, FL 33126

**Current Mailing Address:**

5200 BLUE LAGOON DRIVE  
SUITE 400  
MIAMI, FL 33126 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ZOOK, STUART  
5200 BLUE LAGOON DRIVE  
SUITE 400  
MIAMI, FL 33126 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 NPV MANAGEMENT, LLC  
Address 3211 PONCE DE LEON BLVD., SUITE  
202  
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:** STUART ZOOK

**MANAGER**

**03/29/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date