

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000105953

**Entity Name:** 1669 PARTNERS, LLC

**Current Principal Place of Business:**

1669 COLLINS AVE.  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

605 LINCOLN ROAD, 5TH FLOOR  
MIAMI BEACH, FL 33139 US

**FEI Number:** 45-4657929

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MGR  
Name LOWENSTEIN, DIEGO  
Address 605 LINCOLN RD FIFTH FLOOR  
City-State-Zip: MIAMI BEACH FL 33139

Title MGR  
Name COHEN, PASCAL  
Address 1930 COLLINS AVE. SUITE B2  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PASCAL COHEN

**OFFICIER**

**01/30/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date