

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000019028

**Entity Name:** AGAVE PARTNERS, LLC

**Current Principal Place of Business:**

18167 BISCAYNE BLVD  
AVENTURA, FL 33160

**Current Mailing Address:**

17100 NE 19TH AVE  
#D2  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** 45-4491746

**Certificate of Status Desired:** No

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

OLIVO, CESAR  
20140 N.E. 21ST CT  
NORTH MIAMI, FL 33179 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:** OLIVO, CESAR

03/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name OLIVO, CESAR  
Address 20140 N.E. 21ST CT  
City-State-Zip: NORTH MIAMI FL 33179

Title MGRM  
Name PEREZ- BENATAR, ADRIANA  
Address 20140 N.E. 21ST CT  
City-State-Zip: NORTH MIAMI FL 33179

Title MGRM  
Name PEREZ, SAMUEL D  
Address 1127 ADAM ST  
City-State-Zip: HOLLYWOOD FL 33019

*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:** PEREZ-BENATAR ADRIANA

OWNER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date