## 2015 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:** 

18167 BISCAYNE BLVD AVENTURA. FL 33160 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 01/12/2015

Electronic Signature of Registered Agent

Date

FILED Jan 12, 2015

**Secretary of State** 

CC5674156082

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameOLIVO, CESARNamePEREZ, ADRIANAAddress20140 N.E. 21ST CTAddress20140 N.E. 21ST CT

City-State-Zip: NORTH MIAMI FL 33179 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: ADRIANA PEREZ CFO

Electronic Signature of Signing Authorized Person(s) Detail

01/12/2015 Date