#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000052447

Entity Name: CONSULTATIO BAL HARBOUR, LLC

**Current Principal Place of Business:** 

10201 COLLINS AVENUE #201 BAL HARBOUR, FL 33154

# **Current Mailing Address:**

10201 COLLINS AVENUE #201 BAL HARBOUR, FL 33154 US

### FEI Number: 90-0822752

### Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 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

### Authorized Person(s) Detail :

	Title	MGR	Title	MGR.
	Name	COSTANTINI, EDUARDO F	Name	COSTANTINI, CRISTIAN
	Address	10201 COLLINS AVENUE #201	Address	10201 COLLINS AVENUE #201
	City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	BAL HARBOUR FL 33154
	Title	MGR.	Title	MGR.
	Name	CHOUHY, JOSE M.	Name	COSTANTINI, MARIANA
	Address	10201 COLLINS AVENUE #201	Address	10201 COLLINS AVENUE #201
	City-State-Zip:	BAL HARBOUR FL 33154	City-State-Zip:	BAL HARBOUR FL 33154
	Title	MGR.		
	Name	CORTI-MADERNA, MARCOS		
	Address	10201 COLLINS AVENUE #201		

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: MARCOS CORTI-MADERNA

City-State-Zip: BAL HARBOUR FL 33154

MGR

04/22/2020

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes

Date