

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000062231

**Entity Name:** APT606, LLC

**Current Principal Place of Business:**

16400 NW 59TH AVE 2ND FLOOR  
MIAMI LAKES, FL 33014

**Current Mailing Address:**

16400 NW 59TH AVE 2ND FLOOR  
MIAMI LAKES, FL 33014

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

VILARELLO, ALEJANDRO  
16400 NW 59TH AVENUE  
MIAMI LAKES, FL 33014 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 ELLISON, JASON  
Address 89 NE 40 STREET, 2ND FLOOR  
City-State-Zip: MIAMI FL 33137

*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:** JASON ELLISON

**MANAGER**

**04/26/2015**

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

\_\_\_\_\_ Date