# 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L12000077395

#### Entity Name: EMET INSTITUTE LLC

## **Current Principal Place of Business:**

1200 WEST AVENUE APT 1115 MIAMI BEACH, FL 33139

# **Current Mailing Address:**

44 WEST FLAGLER STREET **SUITE 2300** MIAMI, FL 33130 US

## FEI Number: 30-0740823

### Name and Address of Current Registered Agent:

EXCO US ATRIUM 44 WEST FLAGLER STREET SUITE 2300 MIAMI, FL 33130 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: ALINE DARMOUNI

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	MGRM
Name	PARIENTI, SARAH S
Address	44 WEST FLAGLER STREET SUITE 2300
City-State-Zip:	MIAMI FL 33130

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.

MGRM

SIGNATURE: PARIENTI, SARAH S

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

03/16/2018 Date

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