I hereby certify that the information indicated on this report or supplemental report is true and accurate oath; that I am a managing member or manager of the limited liability company or the receiver or truster that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: SAIDO BERAHINO	AUTHORIZED MEMBER	06/02/2018

SIGNATURE: SAIDO BERAHINO

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L12000151991

Entity Name: 520 LAKEVIEW CT. LLC

Current Principal Place of Business:

520 LAKEVIEW CT. В MIAMI BEACH, FL 33140

Current Mailing Address:

4680 NW 74TH AVE MIAMI, FL 33166

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

CARDENAS, PABLO 4680 NW 74TH AVE MIAMI, FL 33166 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	MANAGER	Title	AUTHORIZED MEMBER
Name	DE CARDENAS, NELLY	Name	BERAHINO, SAIDO
Address	4680 NW 74TH AVE	Address	520 LAKEVIEW CT. B
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI BEACH FL 33140

FILED Jun 02, 2018 Secretary of State CC3065484413

Date

Certificate of Status Desired: No

Date