

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000152638

**Entity Name:** BEACH SKYLINE, LLC

**Current Principal Place of Business:**

15901 COLLINS AVE  
APT 1603  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

15901 COLLINS AVE  
APT 1603  
SUNNY ISLES BEACH, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MAMBRINI, DANTE  
15901 COLLINS AVE  
APT 1603  
SUNNY ISLES BEACH, FL 33160 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:** DANTE MAMBRINI

04/26/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR.
Name	MAMBRINI, DANTE	Name	SANCHEZ DE MAMBRINI, ADRIANA
Address	15901 COLLINS AVE APT 1603	Address	15901 COLLINS AVE APT 1603
City-State-Zip:	SUNNY ISLES BEACH FL 33160	City-State-Zip:	SUNNY ISLES BEACH FL 33160

*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:** MAMBRINI , DANTE

MGR

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date