# SIGNATURE: ISABEL LLOPART

Electronic Signature of Signing Authorized Person(s) Detail

#### 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000153401

Entity Name: MONROE STREET APARTMENTS, LLC

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

1900 VAN BUREN STREET APT. 118 HOLLYWOOD, FL 33020

# **Current Mailing Address:**

**1900 VAN BUREN STREET** APT. 118 HOLLYWOOD, FL 33020

#### FEI Number: 46-1558814

# Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

STRALEY & OTTO, P.A. 2699 STIRLING ROAD SUITE C-207 FORT LAUDERDALE, FL 33312 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:

# Authorized Person(s) Detail :

Authorized Person(s) Detail .			
Title	MGRM	Title	MRG
Name	LLOPART, ISABEL	Name	CUETO PORTES, PILAR J
Address	1900 VAN BUREN STREET APT. 118	Address	1900 VAN BUREN STREET APT. 118
City-State-Zip:	HOLLYWOOD FL 33020	City-State-Zip:	HOLLYWOOD FL 33020

Certificate of Status Desired: No

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 04/22/2013

MANAGING MEMBER

Date

Date

FILED Apr 22, 2013 Secretary of State CC9042858454