

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000158760

**Entity Name:** BAY HARBOR PARTNERS GP, LLC

**Current Principal Place of Business:**

150 SE 2ND AVE  
SUITE 800  
MIAMI, FL 33131

**FILED**  
**Apr 14, 2017**  
**Secretary of State**  
**CC4356650051**

**Current Mailing Address:**

150 SE 2ND AVE  
SUITE 800  
MIAMI, FL 33131 US

**FEI Number:** 46-1601254

**Certificate of Status Desired:** No

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

BCRA, LLC  
7777 GLADES RD, STE. 300  
BOCA RATON, FL 33434 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	MGR	Title	MGR
Name	BALLESTAS, VICTOR	Name	STABILE, NELSON
Address	150 SE 2ND AVE SUITE 800	Address	150 SE 2ND AVE SUITE 800
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGR		
Name	MELO, PAULO		
Address	150 SE 2ND AVE SUITE 800		
City-State-Zip:	MIAMI FL 33131		

*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:** NELSON STABILE

**MANAGER**

**04/14/2017**

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

\_\_\_\_\_  
Date