

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000160775

**Entity Name:** MOA 1501 LLC

**Current Principal Place of Business:**

2745 PONCE DE LEON BLVD  
1501  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2745 PONCE DE LEON BLVD  
1501  
CORAL GABLES, FL 33134 US

**FEI Number:** 46-1707391

**Certificate of Status Desired:** No

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

G&A ACCOUNTING AND TAXES SERVICES INC  
6981 SW 57TH STREET  
MIAMI, FL 33143 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:** RICHARD ARRIETA

02/17/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	BARROSO, MAXIMINO	Name	DA SILVA , NELLY
Address	15901 COLLINS AVENUE 1501	Address	15901 COLLINS AVENUE 1501
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:** MAXIMINO BARROSO

**AUTHORIZED  
REPRESENTATIVE**

02/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date