

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000002880

**Entity Name:** CUNILL POLA, LLC

**Current Principal Place of Business:**

6600 SW 51TERRACE  
MIAMI, FL 33155

**Current Mailing Address:**

6600 SW 51 TERRACE  
MIAMI, FL 33155 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FABRE, FRANK R.S.  
2310 COUNTRY CLUB PRADO  
CORAL GABLES, FL 33134 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 MGRM  
Name CUNILL POLA, ISABEL CRISTINA  
Address 6600 SW 51 TERRACE  
City-State-Zip: MIAMI FL 33155

Title MGRM  
Name POLA, JORGE JR.  
Address 6600 SW 51 TERRACE  
City-State-Zip: MIAMI FL 33155

*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:** JORGE POLA

MGR

03/03/2017

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

\_\_\_\_\_  
Date