## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000050165

Entity Name: 1824 LLC

**Current Principal Place of Business:** 

2950 ST THOMAS DRIVE COOPER CITY. FL 33024

**Current Mailing Address:** 

2950 ST THOMAS DRIVE COOPER CITY, FL 33024 US

FEI Number: 60-0246477 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MONTE, LOUELLA 4041 COLLINS AVE 918 MIAMI BEACH, FL 33140 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

FILED Feb 10, 2014

**Secretary of State** 

CC4186852828

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name DEONARINE, AMIT Name MONTE, LOUELLA

Address 2950 ST THOMAS DRIVE Address 4041 COLLINS AVE #918
City-State-Zip: COOPER CITY FL 33024 City-State-Zip: MIAMI BEACH FL 33140

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: AMIT DEONARINE

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER 02/10/2014

Date