

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000082998

**Entity Name:** PAOPATOSCALE BRICKELL, LLC

**Current Principal Place of Business:**

1800 S.W. 1ST. AVE  
SUITE 602  
MIAMI, FL 33129

**Current Mailing Address:**

1800 S.W. 1ST. AVE  
SUITE 602  
MIAMI, FL 33129 US

**FEI Number:** 30-0789874

**Certificate of Status Desired:** No

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

AGI REGISTERED AGENTS, INC  
1000 BRICKELL AVENUE, SUITE 300  
MIAMI, FL 33131 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  
Name PIETRI, OSCAR ALFREDO  
Address 1800 S.W. 1ST. AVE  
SUITE 602  
City-State-Zip: MIAMI FL 33129  
  
Title MGR  
Name PIETRI, JOSE ANTONIO  
Address 1800 S.W. 1ST. AVE  
SUITE 602  
City-State-Zip: MIAMI FL 33129

Title MGR  
Name BETANCOURT DE PIETRI, MARIA  
ANGELICA  
Address 1800 S.W. 1ST. AVE  
SUITE 602  
City-State-Zip: MIAMI FL 33129

*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:** OSCAR ALFREDO PIETRI

MGR

03/22/2022

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

\_\_\_\_\_  
Date