

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000103181

**Entity Name:** IDEA CAPITAL LLC

**Current Principal Place of Business:**

2650 SW 37 AVE  
607  
MIAMI, FL 33133

**Current Mailing Address:**

1825 PONCE DE LEON BLVD  
133  
CORAL GABLES, FL 33134 US

**FEI Number:** 47-4876250

**Certificate of Status Desired:** No

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

NIKOLIC, NINA  
2650 SW 37 AVE  
607  
MIAMI, FL 33133 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           MANAGER  
Name           MENENDEZ, ARIEL  
Address        2650 SW 37 AVE  
                  607  
City-State-Zip: MIAMI FL 33133

Title           MANAGER  
Name           NIKOLIC, NINA  
Address        2650 SW 37 AVE  
                  607  
City-State-Zip: MIAMI FL 33133

*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:** ARIEL MENENDEZ

**MANAGER**

**03/03/2019**

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

\_\_\_\_\_  
Date