

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000112935

**Entity Name:** 6585 ALLISON ROAD, LLC

**Current Principal Place of Business:**

2137 NW 2ND AVE  
MIAMI, FL 33127

**Current Mailing Address:**

2137 NW 2ND AVE  
MIAMI, FL 33127 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ZAMORA, GEORGE S ESQUIRE  
3191 CORAL WAY  
SUITE 106  
MIAMI, FL 33145 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 CEDENO, RAFAEL  
Address 2137 NW 2ND AVE  
City-State-Zip: MIAMI FL 33127

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:** RAFAEL CEDENO

MGRM

05/02/2017

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

\_\_\_\_\_  
Date