

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000143068

**Entity Name:** INVERCREEK INVESTMENTS, LLC**Current Principal Place of Business:**3135 SW 3RD AVENUE  
MIAMI, FL 33129**Current Mailing Address:**3135 SW 3RD AVENUE  
MIAMI, FL 33129**FEI Number: 30-0945044****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALECO HARALAMBIDES, P.A.  
3135 SW 3RD AVENUE  
MIAMI, FL 33129 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	LACHNER, ALVARO
Address	3135 SW 3RD AVENUE
City-State-Zip:	MIAMI FL 33129

Title	AMBR
Name	LACHNER, ALVARO
Address	3135 SW 3RD AVENUE
City-State-Zip:	MIAMI FL 33129

Title	AMBR
Name	VALERIO, EUGENIA
Address	3135 SW 3RD AVENUE
City-State-Zip:	MIAMI FL 33129

Title	AMBR
Name	LACHNER, CARLOS
Address	3135 SW 3RD AVENUE
City-State-Zip:	MIAMI FL 33129

Title	AMBR
Name	LACHNER, IRENE
Address	3135 SW 3RD AVENUE
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: ALVARO LACHNER****MGR****04/28/2020**\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail\_\_\_\_\_  
Date