

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000143165

**Entity Name:** BRICKELL TWINS "LLC"

**Current Principal Place of Business:**

350 S. MIAMI AVE.  
2706  
MIAMI, FL 33131

**Current Mailing Address:**

1000 WEST AVE.  
924  
MIAMI BEACH, FL 33139 US

**FEI Number:** 46-3945472

**Certificate of Status Desired:** No

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

JAKUBOWICZ, MARIA R  
1000 WEST AVE.  
924  
MIAMI BEACH, FL 33139 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 MMGR, AUTHORIZED MEMBER  
Name JAKUBOWICZ, MARIA R  
Address 1000 WEST AVE.# 924  
City-State-Zip: MIAMI BEACH FL 33139

Title MGRM  
Name BUDMAN, JONATHAN  
Address 1000 WEST AVE. # 924  
City-State-Zip: MIAMI BEACH FL 33139

Title MGRM  
Name BUDMAN, MAIA  
Address 1000 WEST AVE. # 924  
City-State-Zip: MIAMI BEACH FL 33139

*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:** MARIA JAKUBOWICZ

**03/06/2019**

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

\_\_\_\_\_  
Date