

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000150679

**Entity Name:** PLAYAMAR LLC

**Current Principal Place of Business:**

325 S BISCAYNE BLVD  
523  
MIAMI, FL 33131

**Current Mailing Address:**

325 S BISCAYNE BLVD  
523  
MIAMI, FL 33131

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

BENARD, CARMEN R  
325 S BISCAYNE BLVD  
523  
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 SOLYMARE LLC  
Address 325 S BISCAYNE BLVD #523  
City-State-Zip: MIAMI FL 33131

Title AMBR  
Name SOLYMARE LLC  
Address 325 S BISCAYNE BLVD #523  
City-State-Zip: MIAMI FL 33131

Title AR  
Name BENARD, CARMEN R  
Address 325 S BISCAYNE BLVD, APT. 523  
City-State-Zip: MIAMI FL 33131

Title AR  
Name BENARD, CARMEN G  
Address 681 NE 55 TER  
City-State-Zip: MIAMI FL 33137

*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:** CARMEN G BENARD

AR

02/07/2019

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

\_\_\_\_\_  
Date