

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000151676

**Entity Name:** WILLIAMS ISLAND 1604, LLC

**Current Principal Place of Business:**

3135 SW THIRD AVENUE  
MIAMI, FL 33129

**Current Mailing Address:**

505 TREMONT STREET  
UNIT 905  
BOSTON, MA 02116

**FEI Number:** 46-4649682

**Certificate of Status Desired:** No

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

ALECO HARALAMBIDES, P.A.  
3135 SW THIRD 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 ARENELLA, DIANE  
Address 505 TREMONT STREET, UNIT 905  
City-State-Zip: BOSTON MA 02116

*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:** DIANE ARENELLA

**MANAGER**

**02/04/2018**

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

\_\_\_\_\_  
Date