

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000172032

Entity Name: BOCK, LLC**Current Principal Place of Business:**6303 BLUE LAGOON DRIVE, SUITE 200
MIAMI, FL 33126**Current Mailing Address:**6303 BLUE LAGOON DRIVE, SUITE 200
MIAMI, FL 33126 US**FEI Number:** 35-2493812**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARTINEZ, JORGE CPA
6303 BLUE LAGOON DRIVE, SUITE 200
MIAMI, FL 33126 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	AMBR
Name	BOCK, HARTMUT K
Address	6303 BLUE LAGOON DRIVE, SUITE 200
City-State-Zip:	MIAMI FL 33126

Title	AMBR
Name	MOSQUERA, MARIA S
Address	6303 BLUE LAGOON DRIVE, SUITE 200
City-State-Zip:	MIAMI FL 33126

Title	AMBR
Name	BOCK, DEMIAN
Address	6303 BLUE LAGOON DRIVE, SUITE 200
City-State-Zip:	MIAMI FL 33126

Title	AMBR
Name	BOCK, MICHAEL
Address	6303 BLUE LAGOON DRIVE, SUITE 200
City-State-Zip:	MIAMI FL 33126

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: HARTMUT BOCK**PRES****04/23/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date