

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000054217

**Entity Name:** 1800 N MIAMI AVE, LLC

**Current Principal Place of Business:**

1800 NORTH MIAMI AVENUE  
MIAMI, FL 33136

**Current Mailing Address:**

1800 NORTH MIAMI AVENUE  
MIAMI, FL 33136 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

JOSEPH R. COLLETTI P.A.  
4770 BISCAYNE BLVD, SUITE 1400  
MIAMI, FL 33137 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	Title	MGR
Name	MELO, LUIZ R	Name	CHRISTA, SCHMIDT
Address	1800 NORTH MIAMI AVENUE	Address	1800 NORTH MIAMI AVENUE
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136

*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: CHRISTA SCHMIDT**

**MGR**

**04/10/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date