## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000125874

Entity Name: SUNWEST OFFICE PARK, LLC

illy Name. Solvives of Fice Park, L

**Current Principal Place of Business:** 

15481 SW 12TH STREET UNIT 309

SUNRISE, FL 33326

**Current Mailing Address:** 

15481 SW 12TH STREET UNIT 309 SUNRISE, FL 33326 US

FEI Number: 47-1606725

Certificate of Status Desired: No

FILED Mar 16, 2017

**Secretary of State** 

CC3234164439

Name and Address of Current Registered Agent:

LEOPOLD KORN, P.A. 20801 BISCAYNE BLVD. SUITE 501 AVENTURA, FL 33180 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 PERRY, CRAIG S TRUSTEE
Address 15481 SW 12TH STREET

**UNIT 309** 

City-State-Zip: SUNRISE FL 33326

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: CRAIG PERRY MEMBER 03/16/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date