MIAMI, FL 33	131			
Current Mai	ling Address:			
1428 BRICK MIAMI, FL	ELL AVENUE, SUITE 500 33131 US			
FEI Number: 47-2848426			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
ANGEL D. COF 780 NW 42ND J SUITE 325	AVE			
MIAMI, FL 331	28 03			
·	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of F	Florida.
The above name		its registered office or regis	tered agent, or both, in the State of F	
The above name	d entity submits this statement for the purpose of changing i	ts registered office or regis	tered agent, or both, in the State of F	<sup>=lorida.</sup> 01/22/2020 Date
The above name SIGNATURE	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of F	01/22/2020
The above name SIGNATURE	d entity submits this statement for the purpose of changing i E: ANGEL D. CORDOVA Electronic Signature of Registered Agent	its registered office or regis	tered agent, or both, in the State of F	01/22/2020
The above name SIGNATURE Authorized	d entity submits this statement for the purpose of changing is ANGEL D. CORDOVA Electronic Signature of Registered Agent Person(s) Detail :			01/22/2020
The above name SIGNATURE Authorized Title	d entity submits this statement for the purpose of changing is ANGEL D. CORDOVA Electronic Signature of Registered Agent Person(s) Detail : AR	Title	MGR	01/22/2020 Date
The above name SIGNATURE Authorized Title Name	d entity submits this statement for the purpose of changing is ANGEL D. CORDOVA Electronic Signature of Registered Agent Person(s) Detail : AR MENESES, VINEYKA PLAZA OBARRIO, SUITE 202	Title Name	MGR DEGREGORIO, ROXANNA 1428 BRICKELL AVENUE, SL	01/22/2020 Date

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: ROXANNA DE GREGORIO

Electronic Signature of Signing Authorized Person(s) Detail

MGR

01/22/2020

FILED Jan 22, 2020 **Secretary of State** 0082118089CC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L14000130220

Entity Name: 495 BRICKELL, LLC

## **Current Principal Place of Business:**

1428 BRICKELL AVENUE, SUITE 500

Date