

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L14000160266

**FILED**  
**Sep 28, 2020**  
**Secretary of State**  
**1873532645CR**

**Entity Name:** THE COLLINS 1206 LLC

**Current Principal Place of Business:**

6917 COLLINS AVE.  
APT. 1206  
MIAMI BEACH, FLORIDA 33141

**Current Mailing Address:**

6917 COLLINS AVE.  
APT. 1206  
MIAMI BEACH, FLORIDA 33141 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

ALZIR, FRAGA  
6917 COLLINS AVE  
1206  
MIAMI BEACH, FL 33141 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:** ALZIR FRAGA

09/28/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name FRAGA, ALZIR  
Address 6917 COLLINS AVE 1206  
City-State-Zip: MIAMI BEACH FL 33141

Title MGRM  
Name FRAGA, EUNICE  
Address 6917 COLLINS AVE 1206  
City-State-Zip: MIAMI BEACH FL 33141

Title MBR  
Name FRAGA, RAFAEL  
Address 6917 COLLINS AVE 1206  
City-State-Zip: MIAMI BEACH FL 33141

Title MBR  
Name FRAGA, RAQUEL  
Address 6917 COLLINS AVE 1206  
City-State-Zip: MIAMI BEACH FL 33141

*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:** ALZIR FRAGA

MGRM

09/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date