

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000164513

**Entity Name:** ABRILUEN, LLC

**Current Principal Place of Business:**

2875 NE 191ST STREET, SUITE 801  
AVENTURA, FL 33180

**Current Mailing Address:**

2875 NE 191ST STREET, SUITE 801  
AVENTURA, FL 33180

**FEI Number:** 37-1767578

**Certificate of Status Desired:** No

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

SERBER & ASSOCIATES, P.A.  
2875 NE 191ST STREET, SUITE 801  
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 MGR  
Name ANTUN, MARCELA  
Address 2875 NE 191ST STREET, SUITE 801  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name VALENTINI, MARCELO  
Address 2875 NE 191ST STREET, SUITE 801  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name VALENTINI, ABRIL  
Address 2875 NE 191ST STREET, SUITE 801  
City-State-Zip: AVENTURA FL 33180

*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:** ANTUN , MARCELA

MGR

02/06/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date