2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000184055

Entity Name: 1651SW, LLC

Current Principal Place of Business:

1651 SW 2 STREET MIAMI , FL 33135

Current Mailing Address:

6538 COLLINS AVE SUITE 314 MIAMI BEACH, FL 33141 US

FEI Number: 47-2443169

Name and Address of Current Registered Agent:

LAM, CYNTHIA K 6538 COLLINS AVE SUITE 314 MIAMI BEACH, FL 33141 US Certificate of Status Desired: No

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.

CYNTHIA K LAM		01/08/2017
Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :		
MANAGER	Title	AUTHORIZED REPRESENTATIVE,
LAM, CYNTHIA K	Nomo	
Address 6538 COLLINS AVE SUITE 314	Name	ARNAUD, KAREN
	Address	6538 COLLINS AVE
City-State-Zip: MIAMI BEACH FL 33141		SUITE 314
	City-State-Zip:	MIAMI BEACH FL 33141
AUTHORIZED MEMBER, AUTHORIZED		
REPRESENTATIVE	litle	AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
CASTRILLO, ALEJANDRO		-
Address 6538 COLLINS AVE SUITE 314	Name	LAM, ALEX
	Address	6538 COLLINS AVE
MIAMI BEACH FL 33141		SUITE 314
	City-State-Zip:	MIAMI BEACH FL 33141
	Electronic Signature of Registered Agent Person(s) Detail : MANAGER LAM, CYNTHIA K 6538 COLLINS AVE SUITE 314 MIAMI BEACH FL 33141 AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE CASTRILLO, ALEJANDRO 6538 COLLINS AVE SUITE 314	Electronic Signature of Registered Agent Verson(s) Detail : MANAGER Title LAM, CYNTHIA K Name 6538 COLLINS AVE Address SUITE 314 Address MIAMI BEACH FL 33141 City-State-Zip: AUTHORIZED MEMBER, AUTHORIZED Title CASTRILLO, ALEJANDRO Name 6538 COLLINS AVE Address MIAMI BEACH FL 33141 Mame

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: CYNTHIA K LAM

REGISTERED AGENT 01/08/2017

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 08, 2017 Secretary of State CC9026571145