#### 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: BERTHA GUTIERREZ

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: 16148 EMERALD COVE RD LLC

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

12973 SW 112 STREET #202 MIAMI, FL 33186

### **Current Mailing Address:**

12973 SW 112 STREET #202 MIAMI, FL 33186 US

DOCUMENT# L15000023112

### **FEI Number: NOT APPLICABLE**

# Name and Address of Current Registered Agent:

MUNERA, OSCAR 5012 SW 173 AVENUE MIRAMAR, FL 33029 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	: OSCAR MUNERA			01/15/2019
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MANAGER	
Name	MUNERA, OSCAR	Name	GUTIERREZ, BERTHA	
Address	5012 SW 173 AVENUE	Address	5012 SW 173 AVENUE	
City-State-Zip:	MIRAMAR FL 33029	City-State-Zip:	MIRAMAR FL 33029	

Certificate of Status Desired: No

FILED Jan 15, 2019

Secretary of State

1471375840CC

MANAGER

01/15/2019

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Date