

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000048064

**Entity Name:** 1719 VIRGINIA LLC

**Current Principal Place of Business:**

20515 E. COUNTRY CLUB DRIVE  
APT 731  
AVENTURA, FL 33180

**Current Mailing Address:**

20515 E. COUNTRY CLUB DRIVE  
APT 731  
AVENTURA, FL 33180 US

**FEI Number:** 47-3478991

**Certificate of Status Desired:** No

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

LONG LIFE 63 LLC  
20515 E. COUNTRY CLUB DRIVE  
APT 731  
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 LONG LIFE 63 LLC  
Address 11481 NW 77ST STREET  
City-State-Zip: DORAL FL 33178

*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:** LONG LIFE 63 LLC

MGR

04/28/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date