# 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: RUSSELL C. FAIBISCH

Electronic Signature of Signing Authorized Person(s) Detail

1000 N.W. 14 STREET

### FEI Number: 47-4547669

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

SNYDER, SHAWN C. 7931 ORANGE DRIVE DAVIE, FL 33328 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	SHAWN C. SNYDER			06/22/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	FAIBISCH, CHARLES	Name	FAIBISCH, RUSSELL C	
Address	1000 N.W. 14 STREET	Address	1000 NW 14TH ST	
City-State-Zip:	MIAMI FL 33136	City-State-Zip:	MIAMI FL 33136	

DOCUMENT# L15000114082

Entity Name: 9000 RESIDENCE, LLC

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

1000 N.W. 14 STREET MIAMI, FL 33136

## **Current Mailing Address:**

MIAMI, FL 33136 US

# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Certificate of Status Desired: Yes

MANAGER

06/22/2020

FILED Jun 22, 2020 Secretary of State 3472276063CC

Date