## **2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000127432

Entity Name: PATERNAL LLC

**Current Principal Place of Business:** 

6248 SW 25 STREET MIAMI, FL 33155

**Current Mailing Address:** 

6248 SW 25 STREET MIAMI, FL 33155 US

FEI Number: 47-5401067 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

OLSEN, GABRIELA 6248 SW 25 STREET MIAMI, FL 33155 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

FILED Feb 17, 2020

**Secretary of State** 

7643414357CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameOLSEN, GABRIELANameOLSEN, FEDERICOAddress6248 SW 25 STREETAddress6248 SW 25 STREET

City-State-Zip: MIAMI FL 33155 City-State-Zip: MIAMI FL 33155

Title AMBR

Name OLSEN, CHRISTIAN
Address 6248 SW 25 STREET
City-State-Zip: MIAMI FL 33155

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: GABRIELA OLSEN AMBR

Electronic Signature of Signing Authorized Person(s) Detail

AMBR 02/17/2020

Date