

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000132742

**Entity Name:** ECHO AVENTURA 407, LLC

**Current Principal Place of Business:**

3250 NW 188 STREET  
407  
AVENTURA, FL 33180

**Current Mailing Address:**

3250 NE 188 STREET  
#407  
AVENTURA, FL 33180 US

**FEI Number:** 47-5201392

**Certificate of Status Desired:** Yes

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

C.A. CORPORATE SERVICES, INC.  
ATTN: MESTRE  
150 ALHAMBRA CIRCLE, #715  
CORAL GABLES, FL 33134 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 AR  
Name INTERNATIONAL WEALTH PLANNING  
SOLUTIONSLLC  
Address 150 ALHAMBRA CIRCLE, #715  
City-State-Zip: CORAL GABLES FL 33134

*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:** JORGE STEFFENS

**DIRECTOR**

**04/07/2017**

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

\_\_\_\_\_  
Date