

**2019 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L15000159485

**FILED**  
**Mar 04, 2019**  
**Secretary of State**  
**2696870415CC**

**Entity Name:** COCONUT GROVE RECOVERY LLC

**Current Principal Place of Business:**

5001 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

5001 HOLLYWOOD BLVD.  
HOLLYWOOD, FL 33021 US

**FEI Number:** 47-5092288

**Certificate of Status Desired:** No

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

BARNHART, ESQ., VALERIE  
12555 ORANGE DRIVE, SECOND FLOOR  
DAVIE, FL 33330 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:** VALERIE BARNHART, ESQ.

03/04/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GIRALDEZ, BRIAN  
Address 5001 HOLLYWOOD BLVD.  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name WARD, CHRISTOPHER  
Address 5001 HOLLYWOOD BLVD.  
City-State-Zip: HOLLYWOOD FL 33021

Title MANAGER  
Name SLATUS, SHLOMO LEVI  
Address 5001 HOLLYWOOD BLVD.  
City-State-Zip: HOLLYWOOD FL 33021

*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:** BRIAN GIRALDEZ

CEO

03/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date