# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L15000170475

Entity Name: MIAMI MILLENNIAL INVESTMENT FIRM, LLC

# Current Principal Place of Business:

6838 NW 18TH AVE MIAMI, FL 33147

# **Current Mailing Address:**

6838 NW 18TH AVE MIAMI, FL 33147 US

# FEI Number: 81-1251995

# Name and Address of Current Registered Agent:

ARNOLD, BOB 1200 BRICKELL AVE STE 1450 MIAMI, FL 33131 US 5

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

### Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	GIBSON, PANDWE	Name	CAMPBELL, RASHADA
Address	6838 NW 18TH AVE	Address	6838 NW 18TH AVE
City-State-Zip:	MIAMI FL 33147	City-State-Zip:	MIAMI FL 33147
Title	MGR	Title	MGR
Name	RANDOLPH, ANTHONY ERNISHA	Name	STEVEN OSAKUE, KENASHA PAUL
Name	RANDOLFTI, ANTHONT ERNISHA		
Address	6838 NW 18TH AVE	Address	6838 NW 18TH AVE
City-State-Zip:	MIAMI FL 33147	City-State-Zip:	MIAMI FL 33147
Title	MGR	Title	MGR
Title Name	MGR FLEURANVIL, FABIOLA	Title Name	MGR PAYNE, CHRISTOPHER
	-		
Name	FLEURANVIL, FABIOLA	Name	PAYNE, CHRISTOPHER 6838 NW 18TH AVE
Name Address	FLEURANVIL, FABIOLA 6838 NW 18TH AVE	Name Address City-State-Zip:	PAYNE, CHRISTOPHER 6838 NW 18TH AVE MIAMI FL 33147
Name Address	FLEURANVIL, FABIOLA 6838 NW 18TH AVE	Name Address	PAYNE, CHRISTOPHER 6838 NW 18TH AVE
Name Address City-State-Zip:	FLEURANVIL, FABIOLA 6838 NW 18TH AVE MIAMI FL 33147	Name Address City-State-Zip:	PAYNE, CHRISTOPHER 6838 NW 18TH AVE MIAMI FL 33147
Name Address City-State-Zip: Title	FLEURANVIL, FABIOLA 6838 NW 18TH AVE MIAMI FL 33147 MGR	Name Address City-State-Zip: Title	PAYNE, CHRISTOPHER 6838 NW 18TH AVE MIAMI FL 33147 MGR
Name Address City-State-Zip: Title Name	FLEURANVIL, FABIOLA 6838 NW 18TH AVE MIAMI FL 33147 MGR SMITH, KEVIN	Name Address City-State-Zip: Title Name	PAYNE, CHRISTOPHER 6838 NW 18TH AVE MIAMI FL 33147 MGR MCCARTY, TYRONE 6838 NW 18TH AVE

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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: FABIOLA FLEURANVIL

MGR

04/29/2016 Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

### Date

# Authorized Person(s) Detail Continued :

Title	MGR	Title	MGR
Name	CHERILUS, GIVENS	Name	ST.FORT, EVANS
Address	6838 NW 18TH AVE	Address	6838 NW 18TH AVE
City-State-Zip:	MIAMI FL 33147	City-State-Zip:	MIAMI FL 33147
Title	MGR	Title	MGR
Title Name	MGR RINKINS, ZACHARY ROSHELL	Title Name	GREEN HARVEST INVESTMENT
		Name	GREEN HARVEST INVESTMENT GROUP
Name Address	RINKINS, ZACHARY ROSHELL 6838 NW 18TH AVE		GREEN HARVEST INVESTMENT
Name	RINKINS, ZACHARY ROSHELL 6838 NW 18TH AVE	Name	GREEN HARVEST INVESTMENT GROUP