

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000191146

**Entity Name:** WYNWOOD SPACES 2, LLC

**Current Principal Place of Business:**

8 NE 27TH ST  
MIAMI, FL 33137

**Current Mailing Address:**

8 NE 27TH ST  
MIAMI, FL 33137 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MICULITZKI, YANINA ESQ.  
2999 NE 191 ST  
403  
AVENTURA, FL 33180 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           MANAGER  
Name           MICULITZKI, MARTIN  
Address        8 NE 27 ST  
City-State-Zip: MIAMI FL 33137

Title           MANAGER  
Name           AMKIE LEVY, ELIAS  
Address        19950 W. COUNTRY CLUB DR  
                  900  
City-State-Zip: AVENTURA FL 33180

Title           MANAGER  
Name           CABABIE DANIEL, ELIAS  
Address        19950 W COUNTRY CLUB DRIVE  
                  900  
City-State-Zip: AVENTURA FL 33180

Title           MANAGER  
Name           CABABIE DANIEL, ABRAHAM  
Address        19950 W COUNTRY CLUB DRIVE  
                  900  
City-State-Zip: AVENTURA FL 33180

*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:** MARTIN MICULITZKI

**MANAGER**

**03/05/2019**

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

\_\_\_\_\_  
Date