

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000203780

**Entity Name:** 16047 COLLINS UNIT 601 LLC

**Current Principal Place of Business:**

16047 COLLINS AVE #601  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

1500 SAN REMO AVE #125  
CORAL GABLES, FL 33146 US

**FEI Number:** 81-1509353

**Certificate of Status Desired:** No

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

ATRIUM REGISTERED AGENTS, INC.  
1500 SAN REMO AVE #125  
CORAL GABLES, FL 33146 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 MGR  
Name FERNANDEZ ARIAS, ENRIQUE L  
Address 16047 COLLINS AVE #601  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name BIANCA LUPORI, MARIA  
Address 16047 COLLINS AVE #601  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** FERNANDEZ ARIAS , ENRIQUE L

MGR

03/14/2016

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

\_\_\_\_\_  
Date