

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000043174

**Entity Name:** COLLEGE PARK 291 DUPLEX LLC

**Current Principal Place of Business:**

801 SW 23 AVE  
MIAMI, FL 33135

**Current Mailing Address:**

801 SW 23 AVE  
MIAMI, FL 33135 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

VIDA 4000 PROPERTIES LLC  
801 SW 23 AVE  
MIAMI, FL 33135 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           | AMBR              | Title           | MGR                      |
| Name            | PECKEL, ISAAK     | Name            | VIDA 4000 PROPERTIES LLC |
| Address         | 18851 NE 29 AVE   | Address         | 801 SW 23 AVE            |
| City-State-Zip: | AVENTURA FL 33180 | City-State-Zip: | MIAMI FL 33135           |

*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:** ANA OROZCO

MGR

06/26/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date