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: ELMER GRAHAM

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000063718

Entity Name: EMBASSY 1408, LIMITED LIABILITY COMPANY

Current Principal Place of Business:

313 CHEEK SPARGER RD COLLEYVILLE, TX 76034

Current Mailing Address:

313 CHEEK SPARGER RD COLLEYVILLE. TX 76034 US

FEI Number: 81-1958549

Name and Address of Current Registered Agent:

INCORP SERVICES, INC 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	GRAHAM, ELMER A	Name	ARAUJO PEREZ, YOMAR J
Address	313 CHEEK SPARGER RD	Address	313 CHEEK SPARGER RD
City-State-Zip:	COLLEYVILLE TX 76034	City-State-Zip:	COLLEYVILLE TX 76034

03/02/2018

FILED Mar 02, 2018 Secretary of State CC2056670695

Date

Certificate of Status Desired: No

MANAGER

Date