## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000077577

**Entity Name: ABREVISTA LLC** 

**Current Principal Place of Business:** 

401 E LAS OLAS BLVD 130-370

FT LAUDERDALE, FL 33301

## **Current Mailing Address:**

401 E LAS OLAS BLVD 130-370 FT LAUDERDALE, FL 33301 US

FEI Number: 81-2339759 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WILD, MICHAEL D 1250 S PINE ISLAND RD STE 200 PLANTATION FL 33324 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

**FILED** Jan 29, 2019

**Secretary of State** 

0171081295CC

## Authorized Person(s) Detail:

Title MGRM

NATALIE BUTTO LIVING TRUST Name

401 E LAS OLAS BLVD Address

130-370

City-State-Zip: FT LAUDERDALE FL 33301

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.

01/29/2019 SIGNATURE: NATALIE BUTTO **MGRM**