# Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: ANISIA RODRIGUEZ DEL REY

that my name appears above, or on an attachment with all other like empowered.

City-State-Zip: MIAMI FL 33129

Title	AMBR	Title	AMBR
Name	PAPPAS, KATHERINE A	Name	PAPPAS, MICHAEL I
Address	2121 S.W. 3RD AVENUE SUITE 101	Address	2121 S.W. 3RD AVENUE SUITE 101
City-State-Zip:	MIAMI FL 33129	City-State-Zip:	MIAMI FL 33129
Title	AUTHORIZED REPRESENTATIVE		
Name	RODRIGUEZ DEL REY, ANISIA		
Address	2121 S.W. 3RD AVENUE STE 101		
City-State-Zip	MIAMI EL 33129		

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

SIGNATURE: DAVID B. ISRAEL, ESQ.

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

Electronic Signature of Registered Agent

ISRAEL, ISRAEL & ASSOCIATES, P.A. 6099 STIRLING ROAD SUITE 211 DAVIE, FL 33314 US

Authorized Person(s) Detail :

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.

**Current Mailing Address:** 

2121 S.W. 3RD AVENUE

### Entity Name: 133 LAKE KEOWEE, LLC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

**Current Principal Place of Business:** 

DOCUMENT# L16000115661

2121 S.W. 3RD AVENUE STE 101 MIAMI, FL 33129

STE 101 MIAMI, FL 33129 US

#### FEI Number: NOT APPLICABLE

## REPRESENTATIVE

**AUTHORIZED** 

FILED Mar 06, 2023 Secretary of State 6619008406CC

> 03/06/2023 Date

Certificate of Status Desired: No

Date

03/06/2023