

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000127343

**Entity Name:** TROUVAILLE LLC

**Current Principal Place of Business:**

20900 NE 30 AVENUE  
503  
AVENTURA, FL 33180

**Current Mailing Address:**

655 OLEANDER DRIVE  
HALLANDALE, FL 33009

**FEI Number:** 81-3210144

**Certificate of Status Desired:** No

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

BENCHIMOL, DANIEL M  
20900 NE 30TH AVENUE  
503  
AVENTURA,, FL 33180 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 BENCHIMOL, DANIEL M  
Address 655 OLEANDER DRIVE  
City-State-Zip: HALLANDALE FL 33009

*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:** DANIEL BENCHIMOL

**MANAGER**

**01/31/2017**

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

\_\_\_\_\_  
Date