#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000149839

Entity Name: SOFILU LLC

#### Current Principal Place of Business:

2301 COLLINS AVENUE UNIT 509 MIAMI BEACH, FL 33139

## **Current Mailing Address:**

2301 COLLINS AVENUE UNIT 509 MIAMI BEACH, FL 33139 US

## FEI Number: APPLIED FOR

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

HELLER, DAN P 2701 PONCE DE LEON BOULEVARD SUITE 301 CORAL GABLES, FL 33144 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.

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SIGNATURE	: DAN P HELLER			03/10/2020
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	AMBR	Title	AMBR	
Name	DUMONTET, MARIA B	Name	DUMONTET, SILVIA N	
Address	2301 COLLINS AVENUE, UNIT 509	Address	2301 COLLINS AVENUE, UNIT 5	609
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139	
Title	MGR	Title	MGR	
Name	DUMONTET, MARIA J	Name	DUMONTET, HECTOR	
Address	2301 COLLINS AVENUE, UNIT 509	Address	2301 COLLINS AVENUE	
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	UNIT 509 MIAMI BEACH FL 33139	

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.

MANAGER

## SIGNATURE: HECTOR DUMONTET

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Mar 10, 2020 Secretary of State 4571552560CC

Certificate of Status Desired: No

03/10/2020 Date