#### 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000153558

Entity Name: BRICKELLISTA LLC

Apr 24, 2018 **Secretary of State** CC7300307356

**FILED** 

# **Current Principal Place of Business:**

485 BRICKELL AVE #2909

MIAMI, FL 33131

# **Current Mailing Address:**

485 BRICKELL AVE #2909 MIAMI, FL 33131 US

FEI Number: 81-3591627 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TORRES, EVELYN D 485 BRICKELL AVE #2909 MIAMI, FL 33131 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

TORRES, EVELYN D Name 485 BRICKELL AVE #2909 Address

City-State-Zip: MIAMI FL 33131

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.