FEI Number: APPLIED FOR Name and Address of Current Registered Agent:		Certificate of Status Desired: No		
GUTIERREZ, JO 4649 PONCE D SUITE 301	DRGE A ESQ.			
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.				
		lierea emee er regie	······································	
	: JORGE GUTIERREZ	lerea entre er regie	<b>0</b>	
			<b>0</b>	
SIGNATURE	: JORGE GUTIERREZ		<b>0</b>	5/20/2020
SIGNATURE	Electronic Signature of Registered Agent	Title	<b>0</b>	5/20/2020
SIGNATURE	JORGE GUTIERREZ     Electronic Signature of Registered Agent  Person(s) Detail :		C	5/20/2020
SIGNATURE Authorized I Title	JORGE GUTIERREZ     Electronic Signature of Registered Agent Person(s) Detail :     MANAGER	Title	AUTHORIZED MEMBER	5/20/2020

3365 NE 167 STREET NORTH MIAMI BEACH. FL 33160

**Current Principal Place of Business:** 

## F

DOCUMENT# L16000157926

NORTH MIAMI BEACH. FL 33160

**Current Mailing Address:** 

3365 NE 167 STREET

## N

Entity Name: 3010 AKOYA CONDO PROPERTY LLC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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: ROBERTO CHESSARI

Electronic Signature of Signing Authorized Person(s) Detail

05/20/2020

FILED May 20, 2020 **Secretary of State** 7453424243CC

## MGR

Date