

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000207921

**Entity Name:** BMF RESILIENCE LLC

**Current Principal Place of Business:**

168 SE 1 ST  
707  
MIAMI, FL 33131

**Current Mailing Address:**

168 SE 1 ST  
707  
MIAMI, FL 33131 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

JOSE A. VILLAR CPA, P.A.  
3850 SW 87 AVE STE 301  
MIAMI, FL 33165 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	Title	MGR
Name	BORGHI, STEFANO	Name	MELLI, BARBARA
Address	168 SE 1 ST 707	Address	168 SE 1 ST 707
City-State-Zip:	MIAMI FL 33131	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.*

**SIGNATURE:** STEFANO BORGHI

**MGR**

**02/05/2019**

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

\_\_\_\_\_  
Date