

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000224404

**Entity Name:** RP631 LLC

**Current Principal Place of Business:**

20155 NE 38 CT.  
504  
AVENTURA, FL 33180

**Current Mailing Address:**

20155 NE 38 CT.  
504  
AVENTURA, FL 33180 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARIA, ORTIZ  
7501 E. TREASURE DR.  
107  
NORTH BAY VILLAGE, FL 33141 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 MACALUSO, ROSINA  
Address 20155 NE 38 CT. #504  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name MANISCALCO, MAURIZIO  
Address 20155 NE 38 CT. #504  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name MANISCALCO, GIUSEPPE  
Address 20155 NE 38 CT. #504  
City-State-Zip: AVENTURA FL 33180

Title MGR  
Name MANISCALCO, ALESSANDRO  
Address 20155 NE 38 CT. #504  
City-State-Zip: AVENTURA FL 33180

*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:** GIUSEPPE MANISCALCO

**MANAGER**

**01/12/2017**

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

\_\_\_\_\_  
Date