

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000230352

**Entity Name:** 16901 NE 6 AVE LLC

**Current Principal Place of Business:**

16970 NE 9TH AVENUE  
MIAMI, FL 33162

**Current Mailing Address:**

16970 NE 9TH AVENUE  
MIAMI, FL 33162 UN

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

STRATEGIC CAPITAL ALLIANCE LLC  
16970 NE 9TH AVENUE  
MIAMI, FL 33162 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 STRATEGIC CAPITAL ALLIANCE LLC  
Address 16970 NE 9TH AVE  
City-State-Zip: MIAMI FL 33162

*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:** CHAIM BREIER

MGR

02/28/2023

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

\_\_\_\_\_  
Date