# 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 FANJUL

Electronic Signature of Signing Authorized Person(s) Detail

# 7190 WEST FLAGLER STREET MIAMI, FL 33144

**Current Principal Place of Business:** 

Entity Name: FANJUL ENTERPRISES LLC

## **Current Mailing Address:**

7190 WEST FLAGLER STREET MIAMI. FL 33144

## FEI Number: 81-5158368

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

FANJUL, ROBERTO 7190 WEST FLAGLER STREET MIAMI, FL 33144 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

#### Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	FANJUL, ROBERTO	Name	FANJUL, MAJELA
Address	7190 WEST FLAGLER STREET	Address	7190 WEST FLAGLER STREET
City-State-Zip:	MIAMI FL 33144	City-State-Zip:	MIAMI FL 33144

03/13/2019 PRESIDENT

## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L17000018740

## FILED Mar 13, 2019 Secretary of State 4395062602CC

Date

Certificate of Status Desired: No

Date