

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000029207

Entity Name: LLP ENTERPRISES, LLC**Current Principal Place of Business:**3000 TAFT STREET
HOLLYWOOD, FL 30021**Current Mailing Address:**3000 TAFT STREET
HOLLYWOOD, FL 30021 US**FEI Number:** 35-2596402**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PALLOT, JOSEPH ESQ
825 BRICKELL BAY DRIVE
SUITE 1644
MIAMI, FL 33131 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 PARELLO, LAURENT
Address 10815 NW 5TH STREET
City-State-Zip: PLANTATION FL 33324

Title MGR
Name PARELLO, LAURE
Address 10815 NW 5TH STREET
City-State-Zip: PLANTATION FL 33324

Title MGR
Name MENDELSON, ERIC A
Address 825 BRICKELL BAY DRIVE
SUITE 1644
City-State-Zip: MIAMI FL 33131

Title MGR
Name MACAU, CARLOS L JR
Address 825 BRICKELL BAY DRIVE
SUITE 1644
City-State-Zip: MIAMI FL 33131

Title MGR
Name SUSSER, DAVID
Address 825 BRICKELL BAY DRIVE
SUITE 1644
City-State-Zip: MIAMI FL 33131

Title MGR
Name PARELL, LAURE
Address 13800 NW 2ND STREET
SUITE 100
City-State-Zip: SUNRISE FL 33325

Title MGR
Name PARELLO, LAURENT
Address 13800 NW 2ND STREET
SUITE 100
City-State-Zip: SUNRISE FL 33325

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: CARLOS L. MACAU JR.**TREASURER****04/25/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date