#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L17000030852

#### Entity Name: 133 NE 2 STREET INVESTMENT, LLC

# **Current Principal Place of Business:**

2200 NE 4TH AVE 504 MIAMI, FL 33137

### **Current Mailing Address:**

2200 NE 4TH AVE 504 MIAMI, FL 33137 US

### FEI Number: 82-1750379

### Name and Address of Current Registered Agent:

MONSALVE, CATALINA 2200 NE 4TH AVE 504 MIAMI, FL 33137 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 :

City-State-Zip: MIAMI FL 33132

Authorized Terson(s) Detail.				
	Title	MGR	Title	MGR
	Name	133 NE NALAGRILLET, LLC	Name	133 NE MVA VENTURES, LLC
	Address	10 SW SOUTH RIVER DRIVE	Address	555 NE 15TH ST APT 16H
	City-State-Zip:	701 MIAMI FL 33130	City-State-Zip:	MIAMI FL 33132
	Title	MOD	Title	MGR
	Title	MGR	Name	133 NE APT508 INVESTMENT, LLC
	Name	133 NE KATHSABE, LLC	Address	2200 NE 4TH AVE 505
	Address	340 W FLAGLER ST APT 2203		
	City-State-Zip:	MIAMI FL 33130	City-State-Zip:	MIAMI FL 33137
	<b>T</b> '41-	100		
	Title	MGR		
	Name	133 FEATHERS, LLC		
	Address	253 NE 2ND STREET APT 314		

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.

RA

### SIGNATURE: CATALINA MONSALVE

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Mar 15, 2019 Secretary of State 7064454762CC

Certificate of Status Desired: No

Date