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: DAVID ALTUVE

Electronic Signature of Signing Authorized Person(s) Detail

**FEI Number: APPLIED FOR** 

**Current Mailing Address:** 7999 SW 58 STREET MIAMI, FL 33143

DOCUMENT# L17000031752

**Current Principal Place of Business:** 

COMPANY

7999 SW 58 STREET MIAMI, FL 33143

### Name and Address of Current Registered Agent:

TAPANES LAW, P.A. 990 BISCAYNE BLVD. SUITE O-903 MIAMI, FL 33132 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 ALTUVE, DAVID Name 7999 SW 58 STREET Address City-State-Zip: MIAMI FL 33143

## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: 11930 SW 3 STREET, LLC, A FLORIDA LIMITED LIABILITY

# FILED Mar 01, 2018 Secretary of State CC4069228575

Certificate of Status Desired: No

03/01/2018 AMBR

Date