

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000042110

**Entity Name:** MIG WEST PALM LLC

**Current Principal Place of Business:**

525 S FLAGLER DRIVE  
300  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

525 S FLAGLER DRIVE  
300  
WEST PALM BEACH, FL 33401 US

**FEI Number:** 82-0596014

**Certificate of Status Desired:** Yes

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

VALENCIS, STAN  
525 S FLAGLER DRIVE  
300  
WEST PALM BEACH, FL 33401 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	AR	Title	OFFICE MANAGER
Name	VALENCIS, STAN	Name	SANZONE, MARY
Address	6441 RIVER POINTE WAY	Address	6441 RIVER POINTE WAY
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	JUPITER FL 33458

*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:** MARY SANZONE

**OFFICE MANAGER**

**01/03/2019**

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

\_\_\_\_\_  
Date