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: DIAZ-SALAZAR, JULIANA

Electronic Signature of Signing Authorized Person(s) Detail

ature of Registered Agent		
il :		
	Title	

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.

# Electronic Signa

Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	DIAZ-SALAZAR, JULIANA	Name	SANTOS, TATIANA	
Address	175 SW 7TH ST SUITE 1524	Address	175 SW 7TH ST SUITE 1524	
City-State-Zip:	MIAMI 33130	City-State-Zip:	MIAMI FL 33130	

#### 1524 MIAMI, 33130

### **Current Mailing Address:**

DOCUMENT# L17000042555

Entity Name: AUSTER DESIGN LLC

**Current Principal Place of Business:** 

175 SW 7TH ST 1524 MIAMI, 33130 UN

175 SW 7TH ST

### FEI Number: 82-0603750

## Name and Address of Current Registered Agent:

DIAZ-SALAZAR, JULIANA 175 SW 7TH ST 1524

MIAMI, FL 33130 US

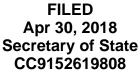
SIGNATURE:

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Certificate of Status Desired: No

Date

04/30/2018 Date



MGR