

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000079556

**Entity Name:** SEABIRD POMPANO LLC

**Current Principal Place of Business:**

184 PALOMA DRIVE  
CORAL GABLES, FL 33143

**Current Mailing Address:**

184 PALOMA DRIVE  
CORAL GABLES, FL 33143 US

**FEI Number:** 82-1141539

**Certificate of Status Desired:** No

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

FUENZALIDA, OSCAR  
184 PALOMA DRIVE  
CORAL GABLES, FL 33143 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:** OSCAR GONZALO FUENZALIDA CALVO

03/20/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                                      |                 |                                   |
|-----------------|--------------------------------------|-----------------|-----------------------------------|
| Title           | MGR                                  | Title           | MGR                               |
| Name            | SILVIA CAROLINA SPICHIGER<br>CORDERO | Name            | OSCAR GONZALO FUENZALIDA<br>CALVO |
| Address         | 2330 PONCE DE LEON BLVD              | Address         | 2330 PONCE DE LEON BLVD           |
| City-State-Zip: | CORAL GABLES FL 33134                | City-State-Zip: | CORAL GABLES FL 33134             |

*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:** OSCAR GONZALO FUENZALIDA CALVO

MGR

03/20/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date