

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000081628

**Entity Name:** AFOX MIAMI LLC

**Current Principal Place of Business:**

SANDYPORT KING FISHER ISLAND  
#2  
NASSAU BAHAMAS, BAHAM-AS

**Current Mailing Address:**

900 BISCAYNE BLVD  
APT 3010  
MIAMI, FL 33132 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

DESIDERIO, NICOLE  
900 BISCAYNE BLVD  
3010  
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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title AMBR  
Name FOX, ADRIANNA  
Address 2950 NE 190 STREET  
City-State-Zip: AVENTURA FL 33180

*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:** ADRIANNA FOX

AMBR

04/12/2021

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

\_\_\_\_\_  
Date