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: DR. ROBERTO J. ACOSTA

PRES

Electronic Signature of Signing Authorized Person(s) Detail

340 ROYAL POINCIANA WAY, SUITE321 PALM BEACH, FL 33480 US

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Mailing Address:

863 COUNTRY CLUB DRIVE NORTH PALM BEACH. FL 33408

DOCUMENT# L17000090342

863 COUNTRY CLUB DRIVE NORTH PALM BEACH. FL 33408 US

Entity Name: 1114 NORTH MICHIGAN, LLC

Current Principal Place of Business:

FEI Number: 81-2664296

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

HANLON, M. TIMOTHY

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:

Authorized Person(s) Detail :						
Title	AUTHORIZED MEMBER	Title	AUTHORIZEI			
Name	ACOSTA, ROBERTO J.	Name	ACOSTA, EL			

Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	ACOSTA, ROBERTO J.	Name	ACOSTA, ELLEN D.
Address	863 COUNTRY CLUB DRIVE	Address	863 COUNTRY CLUB DRIVE
City-State-Zip:	NORTH PALM BEACH FL 33408	City-State-Zip:	NORTH PALM BEACH FL 33408

Certificate of Status Desired: No

02/06/2020

FILED Feb 06, 2020 Secretary of State

4452252993CC

Date

Date