

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000097922

**Entity Name:** 4350 PS ,LLC

**Current Principal Place of Business:**

4350 W. HALLANDALE BEACH BLVD.  
PEMBROKE PINES, FL 33023

**Current Mailing Address:**

4350 W. HALLANDALE BEACH BLVD.  
PEMBROKE PINES, FL 33023 US

**FEI Number:** 82-1423967

**Certificate of Status Desired:** No

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

STEIN, RINA  
4350 W. HALLANDALE BEACH BLVD.  
PEMBROKE PINES, FL 33023 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	Title	AMBR
Name	STEIN, WILHELM	Name	STEIN, RINA
Address	4350 W. HALLANDALE BEACH BLVD.	Address	4350 W. HALLANDALE BEACH BLVD.
City-State-Zip:	PEMBROKE PINES FL 33023	City-State-Zip:	PEMBROKE PINES FL 33023

*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:** RINA STEIN

**TREASURER**

**02/13/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date