

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000172193

**Entity Name:** 423 CHILEAN LLC

**Current Principal Place of Business:**

423 CHILEAN AVE.  
PALM BEACH, FL 33480

**Current Mailing Address:**

423 CHILEAN AVE.  
PALM BEACH, FL 33480 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HIRSCHMANN, SILVIA BEATRICE  
423 CHILEAN AVE.  
PALM BEACH, FL 33480 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:** SILVIA HIRSCHMANN

01/23/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name HIRSCHMANN, SILVIA  
Address 423 CHILEAN AVE.  
City-State-Zip: PALM BEACH FL 33480

*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:** SILVIA HIRSCHMANN

MANAGER

01/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date