

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000206881

**FILED**  
**Jan 11, 2019**  
**Secretary of State**  
**8893945466CC**

**Entity Name:** CE TRUST CUTLER 7643 SW 193 LLC

**Current Principal Place of Business:**

15811 COLLINS AVE  
APT 2306  
N MIAMI BEACH, FL 33160

**Current Mailing Address:**

15811 COLLINS AVE  
APT 2306  
N MIAMI BEACH, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PALACIOS, CARLOS E  
15811 COLLINS AVE  
APT 2306  
N MIAMI BEACH, FL 33160 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 MGR  
Name PALACIOS, CARLOS E  
Address 15811 COLLINS AVE  
APT 2306  
City-State-Zip: N MIAMI BEACH FL 33160

Title MGR  
Name PALACIOS, DANIEL  
Address 15811 COLLINS AVE  
APT 2306  
City-State-Zip: N MIAMI BEACH FL 33160

*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:** DANIEL PALACIOS

**MANAGER**

**01/11/2019**

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

\_\_\_\_\_  
Date