

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000233960

**Entity Name:** TWO PLAZAS, LLC

**Current Principal Place of Business:**

950 BRICKELL BAY DRIVE  
NO. 2208  
MIAMI, FL 33131

**Current Mailing Address:**

950 BRICKELL BAY DRIVE  
NO. 2208  
MIAMI, FL 33131 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CLAVERIE, KARLA  
950 BRICKELL BAY DRIVE  
NO. 2208  
MIAMI, FL 33131 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 CLAVERIE, KARLA  
Address 950 BRICKELL BAY DRIVE, NO. 2208  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name MALPICA DE CLAVERIE, ELSA  
Address 950 BRICKELL BAY DRIVE, NO. 2208  
City-State-Zip: MIAMI FL 33131

*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:** KARLA CLAVERIE

**MGR**

**04/01/2021**

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

\_\_\_\_\_  
Date