

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000255868

**Entity Name:** CUSHMAN & WAKEFIELD OF FLORIDA, LLC

**Current Principal Place of Business:**

333 SE 2ND AVENUE  
SUITE 3900  
MIAMI, FL 33131

**Current Mailing Address:**

333 SE 2ND AVENUE  
SUITE 3900  
MIAMI, FL 33131 US

**FEI Number:** 13-2653099

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 MEMBER  
Name KAIN, PAMELA  
Address 225 W WACKER DRIVE  
SUITE 3000  
City-State-Zip: CHICAGO IL 60606

*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:** PAMELA KAIN

MEMBER

04/12/2019

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

\_\_\_\_\_ Date