## 2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000040041

**Entity Name: MINT CENTER LLC** 

**Current Principal Place of Business:** 

3113 PONCE DE LEON BLVD CORAL GABLES. FL 33134

**Current Mailing Address:** 

1600 PONCE DE LEON BLVD 901 CORAL GABLES. FL 33134 UN

FEI Number: 82-4523636 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

**CBA MIAMI LLC** 1600 PONCE DE LEON BLVD 901 CORAL GABLES, FL 33134 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: MARIA PAULA CHRISTIANSEN 04/30/2022

Electronic Signature of Registered Agent

Date

**FILED** Apr 30, 2022

**Secretary of State** 

0988160407CC

Authorized Person(s) Detail:

Title MGR

CHRISTIANSEN, MARIA PAULA Name

488 NE 18TH STREET Address

4400

City-State-Zip: MIAMI FL 33132

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: MARIA PAULA CHRISTIANSEN

MANAGER

04/30/2022

Date