#### 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000045349

Entity Name: SHERIDAN 519 1012, LLC.

N 519 1012, LLC.

Feb 09, 2020 Secretary of State 9877551568CC

**FILED** 

## **Current Principal Place of Business:**

1825 PONCE DE LEON BLVD #71

CORAL GABLES, FL 33134

# **Current Mailing Address:**

1825 PONCE DE LEON BLVD #71

CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

ZEPEDA, CARLOS J 1825 PONCE DE LEON BLVD #71 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:

Electronic Signature of Registered Agent

Date

### Authorized Person(s) Detail:

Title MGR Title MGR

Name COMAZE USA, LLC. Name COMAZE-FL, LLC.

Address 1825 PONCE DE LEON BLVD Address 1825 PONCE DE LEON BLVD

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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.