| FEI Number:<br>Name and Ac                      | 82-4656087<br>Idress of Current Registered Agent:                   |                      | Certificate of Status Desired: No               |   |
|---|---|----------------------|---|---|
| CELY, HUGO<br>7550 SW 82ND C<br>MIAMI, FL 33143 |   |                      |   |   |
| The above named e                               | entity submits this statement for the purpose of changing its regis | tered office or regi | stered agent, or both, in the State of Florida. |   |
| SIGNATURE:                                      | HUGO CELY   |                      | 06/12/2020                                      |   |
|   | Electronic Signature of Registered Agent                            |                      | Date  | - |
| Authorized P                                    | erson(s) Detail :   |                      |   |   |

Name

Address

City-State-Zip:

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L18000048560

Entity Name: CELY PINZON INVESTMENTS LLC

**Current Principal Place of Business:** 

7550 SW 82ND CT MIAMI, FL 33143

#### **Current Mailing Address:**

7550 SW 82ND CT MIAMI, FL 33143 US

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### N

CELY, HUGO

City-State-Zip: MIAMI FL 33143

7550 SW 82ND CT

Name

Address

| 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: HUGO CELY

CEO

## 06/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

# **FILED** Jun 12, 2020 Secretary of State 6131062117CC

PINZON, CECILIA

7550 SW 82ND CT

MIAMI FL 33143