## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000077721

Entity Name: NSQUARED TB 1115 LLC

**Current Principal Place of Business:** 

16001 COLLINS AVENUE APT 4106 SUNNY ISLES, FL 33160

## **Current Mailing Address:**

16001 COLLINS AVENUE APT 4106 SUNNY ISLES, FL 33160 US

FEI Number: 82-5092853 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SEGAL, WILLIAM J ESQ. 20801 BISCAYNE BOULEVARD SUITE 304 AVENTURA, FL 33180 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

FILED Jan 20, 2020

**Secretary of State** 

9406577973CC

## Authorized Person(s) Detail:

Title MGR Title MGR

Name GANNIO, LEONARDO C Name DEGIOVANNI, FABRICIA R

Address 16001 COLLINS AVENUE, SUITE 4106 Address 16001 COLLINS AVENUE, UNIT 4106

City-State-Zip: SUNNY ISLES FL 33160 City-State-Zip: SUNNY ISLES FL 33160

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: LEONARDO C GANNIO

**MANAGER** 

01/20/2020