

2019 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

Authorized Person(s) Detail :

Title MGR
Name GANNIO, LEONARDO C
Address 16001 COLLINS AVENUE, SUITE 4106
City-State-Zip: SUNNY ISLES FL 33160

Title MGR
Name DEGIOVANNI, FABRICIA R
Address 16001 COLLINS AVENUE, UNIT 4106
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 GANNIO

MANAGER

01/28/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date