

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L18000083305

**Entity Name:** NCD LLC

**Current Principal Place of Business:**

230 NE 4TH STREET APT 3213  
MIAMI, FL 33132

**Current Mailing Address:**

230 NE 4TH STREET APT 3213  
MIAMI, FL 33132 US

**FEI Number:** 32-0565189

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VELEZ, CHRISTOPHER  
5011 SOUTH STATE ROAD 7, SUITE 105  
DAVIE, FL 33314 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:** CHRISTOPHER VELEZ

11/12/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name VELEZ, CHRISTOPHER  
Address 230 NE 4TH STREET APT 3213  
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.*

**SIGNATURE:** CHRISTOPHER VELEZ

OWNER

11/12/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date