

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000159116

**Entity Name:** 1440 NE 130 LLC

**Current Principal Place of Business:**

19380 COLLINS AVE  
1722  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

19380 COLLINS AVE  
1722  
SUNNY ISLES, FL 33160 US

**FEI Number:** 83-1215669

**Certificate of Status Desired:** No

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

LABKOWSKI, NOHUM  
19380 COLLINS AVE  
1722  
SUNNY ISLES, FL 33160 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 VOMED LLC  
Address 19380 COLLINS AVE  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name THE SHAPIRO GRP, L.L.C  
Address 9348 CARLYLE AVE  
City-State-Zip: SURFSIDE FL 33154

*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:** NOHUM LABKOWSKI

**MANAGER**

**02/10/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date