

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000183200

Entity Name: MCCA OFF CAMPUS HOUSING LLC

Current Principal Place of Business:

55 MERRICK WAY
SUITE 202-A
CORAL GABLES, FL 33134

Current Mailing Address:

55 MERRICK WAY
SUITE 202-A
CORAL GABLES, FL 33134

FEI Number: 83-1475315

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLAURE, MARTIN
1207 MARIOLA CT
CORAL GABLES, FL 33134 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 CLAURE, MARTIN
Address 55 MERRICK WAY
City-State-Zip: CORAL GABLES FL 33134

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: MARTIN CLAURE

MGR

02/11/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date