

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000198977

Entity Name: CHAGRIN LEE, LLC

Current Principal Place of Business:

975 N. MIAMI BEACH BOULEVARD
NORTH MIAMI BEACH, FL 33162

Current Mailing Address:

975 N. MIAMI BEACH BOULEVARD
NORTH MIAMI BEACH, FL 33162 US

FEI Number: 83-1640880

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMOLER, BRUCE J
2611 HOLLYWOOD BOULEVARD
HOLLYWOOD, FL 33020 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 | Title | MGR |
| Name | GRATSIANI, GABAY M | Name | CURE, DAVID |
| Address | 975 N. MIAMI BEACH BOULEVARD | Address | 975 N. MIAMI BEACH BOULEVARD |
| City-State-Zip: | NORTH MIAMI BEACH FL 33162 | City-State-Zip: | NORTH MIAMI BEACH FL 33162 |

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: GABAY GRATSIANI

MGR

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date