## **2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000254702

Entity Name: AMI/AFI TPP LLC

**Current Principal Place of Business:** 

4000 PONCE DE LEON BLVD STE 470

CORAL GABLES, FL 33146

## **Current Mailing Address:**

PO BOX 14-4200

CORAL GABLES, FL 33114 US

FEI Number: 83-2409471 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

PERDOMO, MERCEDES 4000 PONCE DE LEON BLVD STE 470 CORAL GABLES, FL 33146 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

FILED May 29, 2020

**Secretary of State** 

9127710642CC

## Authorized Person(s) Detail:

Title AP Title AP

Name COBB, CHARLES E JR Name COBB, SUE M

Address PO BOX 14-4200 Address POST OFFICE BOX 14-4200
City-State-Zip: CORAL GABLES FL 33114 City-State-Zip: CORAL GABLES FL 33114

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.

AP

Electronic Signature of Signing Authorized Person(s) Detail