

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000268544

Entity Name: GRS1 LLC

Current Principal Place of Business:

123 MADEIRA AVE
SUITE 203
CORAL GABLES, FL 33134

Current Mailing Address:

123 MADEIRA AVE
SUITE 203
CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SOUVIRON, GRANT
123 MADEIRA AVE
SUITE 203
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 AMBR
Name SOUVIRON, GRANT
Address 123 MADEIRA AVE SUITE 203
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: GRANT SOUVIRON

MANAGER

04/18/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date