

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000283644

Entity Name: T 500 ALTON MEMBER, LLC

Current Principal Place of Business:

2665 SOUTH BAYSHORE DRIVE SUITE 1020
COCONUT GROVE, FL 33133

Current Mailing Address:

P.O. BOX 330609
MIAMI, FL 33233 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 AUTHORIZED REPRESENTATIVE
Name HALLI, JAYME
Address P.O. BOX 330609
City-State-Zip: MIAMI FL 33233

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: JAYME HALLI

**AUTHORIZED
REPRESENTATIVE**

04/30/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date