## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000093175

Entity Name: MIAMI TLV LLC

**Current Principal Place of Business:** 

11700 NW 29TH PL. SUNRISE, FL 33323

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**Current Mailing Address:** 

FEI Number: 36-4936886 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHARONI, SHAI 1170 NW 29TH PL SUNRISE, FL 33323 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** Jan 28, 2020

**Secretary of State** 

4160304003CC

## Authorized Person(s) Detail:

Title **AMBR** 

Name SHIPONI, YARON Address 11700 NW 29TH PL. City-State-Zip: SUNRISE FL 33323

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.

MR

SIGNATURE: YARON SHIPONI