

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000117517

Entity Name: ELBRUS SOUTH MIAMI, LLC**Current Principal Place of Business:**2950 SW 27TH AVENUE
SUITE 220
MIAMI, FL 33133**Current Mailing Address:**2950 SW 27TH AVENUE
SUITE 220
MIAMI, FL 33133 US**FEI Number:** 84-5064654**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CADENA, GUSTAVO
2950 SW 27TH AVENUE
SUITE 220
MIAMI, FL 33133 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:** GUSTAVO CADENA

09/15/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CEO
Name HORWITZ, VIOLETA
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

Title P
Name PERO, ALFONSO
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

Title VP
Name ALLIENDE, CRISTIAN
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

Title VP
Name MONTES, JUAN IGNACIO
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

Title T
Name SOLARI, ANDRES
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

Title VP
Name PERO, MARIA TRINIDAD O
Address 2950 SW 27TH AVENUE, SUITE 220
City-State-Zip: MIAMI FL 33133

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: JUAN IGNACIO MONTES

VP

09/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date