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.

MANAGER

SIGNATURE: DEVLIN MARINOFF

Electronic Signature of Signing Authorized Person(s) Detail

## SIGNATURE:

Authorized Person(s) Detail :				
Title	MGR	Title	MGR	
Name	MARINOFF, DEVLIN	Name	ARELLANO, ANTONIO	
Address	7215 NE 4TH AVENUE, SUITE 101	Address	7215 NE 4TH AVENUE, SUITE 101	
City-State-Zip:	MIAMI FL 33138	City-State-Zip:	MIAMI FL 33138	

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.

## Electronic Signature of Registered Agent

### **FEI Number: APPLIED FOR**

### Name and Address of Current Registered Agent:

MARINOFF, DEVLIN 7215 NE 4TH AVENUE, SUITE 101 MIAMI, FL 33138 US

7215 NE 4TH AVENUE, SUITE 101 MIAMI, FL 33138

**Current Principal Place of Business:** 

# **Current Mailing Address:**

DOCUMENT# L19000179939

7215 NE 4TH AVENUE, SUITE 101 MIAMI. FL 33138

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: DWNTWN REALTY ADVISORS CAPITAL ADVISORY, LLC

#### FILED Sep 15, 2020 Secretary of State 0377960379CC

Date

Certificate of Status Desired: No

09/15/2020

Date