

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000275340

**Entity Name:** 913 SW 15 AVENUE LLC

**Current Principal Place of Business:**

913 SW 15 AVENUE LLC  
MIAMI, FL 33135

**Current Mailing Address:**

1800 N BAYSHORE DRIVE APT 3601  
MIAMI, FL 33132 UN

**FEI Number:** 84-3744200

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRATZ, LESLIE  
1800 N BAYSHORE DRIVE APT 3601  
MIAMI, FL 33132 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 MGR  
Name GRATZ, LESLIE  
Address 1800 N BAYSHORE DRIVE APT 3601  
  
City-State-Zip: MIAMI FL 33132

*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:** LESLIE GRATZ

**REGISTERED AGENT**

**01/31/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date