

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000123677

**Entity Name:** THE OFFICE OF FRANDLEY DEFILIE LLC

**Current Principal Place of Business:**

2875 NORTHEAST 191ST STREET  
STE 500  
AVENTURA, FL 33180

**Current Mailing Address:**

P.O. BOX 630310  
MIAMI, FL 33163 US

**FEI Number: 85-0905870**

**Certificate of Status Desired:** No

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

DEFILIE, FRANDLEY  
2875 NORTHEAST 191ST STREET  
STE 500  
AVENTURA, FL 33180 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	Title	AMBR
Name	DEFILIE, FRANDLEY	Name	SWANI, ADNAN
Address	P.O. BOX 630310	Address	P.O. BOX 630310
City-State-Zip:	MIAMI FL 33163	City-State-Zip:	MIAMI FL 33163

*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:** FRANDLEY DEFILIE

**PRINCIPAL**

**09/22/2023**

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

\_\_\_\_\_  
Date