Thereby certify that the information indicated on this report of supplemental report is true and accurate and that my electronic signature shall have the same legal enect as it 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.	

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

SIGNATURE: CELIA LOPEZ

MGR	Title	MGR	
CELIA LOPEZ HORNIA	Name	LOPEZ, SABRINA	
15621 SW 54 TERR	Address	1067 SW 134 CT.	
MIAMI FL 33185	City-State-Zip:	MIAMI FL 33184	
	MGR CELIA LOPEZ HORNIA 15621 SW 54 TERR	MGRTitleCELIA LOPEZ HORNIAName15621 SW 54 TERRAddress	

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.

Name and Address of Current Registered Agent:

CELIA LOPEZ HORNIA 7397 SW 8 ST. MIAMI, FL 33144 US

2021 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L20000206272

Entity Name: SISTERS INVESTMENT PROPERTIES, LLC

Current Principal Place of Business:

7397 SW 8 ST. MIAMI, FL 33144

Current Mailing Address:

7397 SW 8 ST. MIAMI, FL 33144

FEI Number: 85-2432997

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 unde

OWNER

05/14/2021

Date

FILED May 14, 2021 Secretary of State 0187351260CC

Certificate of Status Desired: No

Date