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: REINALDO COLINAS

Electronic Signature of Signing Authorized Person(s) Detail

Current Mailing Address: 15456 SW 32TH TERR

Current Principal Place of Business:

Entity Name: 4550 NW 9 ST UNIT 102E LLC

15456 SW 32TH TERR MIAMI, FL 33185 US

15456 SW 32TH TERR MIAMI, FL, FL 33185

DOCUMENT# L22000060890

FEI Number: 92-1730984

Name and Address of Current Registered Agent:

COLINAS, REINALDO A 15456 SW 32TH TERR MIAMI, FL 33185 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:	REINALDO COLINAS	03/09/2023		
	Electronic Signature of Registered Agent			Date
Authorized Pe	erson(s) Detail :			
Title A	AMBR	Title	AMBR	
Name C	COLINAS, REINALDO A	Name	COLINA, ISABEL	
Address 1	15456 SW 32TH TERR	Address	15456 SW 32TH TERR	
City-State-Zip: M	MIAMI FL 33185	City-State-Zip:	MIAMI FL 33185	

Certificate of Status Desired: No

FILED Mar 09, 2023 Secretary of State 7500050473CC

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

AMBR

03/09/2023

Date