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: RONALD MARINI

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail : Title MANAGER Title SECRETARY AGATHIE, INC LLUY, PERLA Name Name 700 BILTMORE WAY P.O. BOX 144097 Address Address #C3 City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: Title MANAGER Title TREASURER Name KASAPI, LILY Name DIAZ, STEPHANIE Address 700 BILTMORE WAY PO BOX 144097 Address #C3

City-State-Zip: CORAL GABLES FL 33114

SIGNATURE: RONALD MARINI

8950 SW. 74TH COURT STE 1811	
MIAMI, FL 33156 US	

Electronic Signature of Registered Agent

## Ν

#### 700 BILTMORE WAY #C3 CORAL GABLES, FL 33134

**Current Principal Place of Business:** 

DOCUMENT# L22000254194

## **Current Mailing Address:**

P.O. BOX 144097 CORAL GABLE, 33114 UN

#### FEI Number: 88-2838715

# Name and Address of Current Registered Agent:

Entity Name: 7315 HARDING MULTIFAMILY LLC

MARINI & ASSOCIATES PA

#### FILED May 15, 2023 Secretary of State 1052721929CC

05/15/2023 Date

Certificate of Status Desired: No

CORAL GABLES FL 33134

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.

CORAL GABLES FL 33114

City-State-Zip:

AGENT

05/15/2023