

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003507

Entity Name: SERVCORP MIAMI LLC**Current Principal Place of Business:**200 SOUTH BISCAYNE BOULEVARD
SUITE 2790
MIAMI, FL 33131**Current Mailing Address:**SERVCORP MIAMI LLC
200 SOUTH BISCAYNE BLVD SUITE 2790
MIAMI, FL 33131 US**FEI Number:** 27-2364830**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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:** JON RICE - ASST. SECRETARY

04/08/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	SECRETARY
Name	PEARCE, GREG
Address	LEVEL 63 MLC CENTRE 19-29 MARTIN PLACE
City-State-Zip:	SYDNEY 2000
Title	VP
Name	ROBINSON, CHARLIE
Address	17 STATE STREET 40TH FLOOR
City-State-Zip:	NEW YORK CITY NY 10004

Title	TREASURER
Name	CLOWES, ANTON
Address	LEVEL 63, MLC CENTRE, 19-29 MARTIN PLACE
City-State-Zip:	SYDNEY 2000
Title	PRESIDENT AND CEO
Name	MOUFARRIGE, ALFRED GEORGE
Address	LEVEL 63, MLC CENTRE, 19-29 MARTIN PLACE
City-State-Zip:	SYDNEY 2000

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: CHARLIE ROBINSON

VICE PRESIDENT

04/08/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date