

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000010107

Entity Name: COUNTYLINE I LLC**Current Principal Place of Business:**700 NW 1ST AVE, STE. 1620
MIAMI, FL 33136**Current Mailing Address:**700 NW 1ST AVE, STE. 1620
MIAMI, FL 33136 US**FEI Number:** 61-1852536**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COBB, KOLLEEN O.P.
700 NW 1ST AVE, STE. 1620
MIAMI, FL 33136 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:** KOLLEEN O.P. COBB

04/25/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	P
Name	SUTTON, CHRISTOPHER J
Address	700 NW 1ST AVE, STE. 1620
City-State-Zip:	MIAMI FL 33136

Title	VP, SECRETARY
Name	COBB, KOLLEEN
Address	700 NW 1ST AVE, STE. 1620
City-State-Zip:	MIAMI FL 33136

Title	VP, TREASURER, ASST. SECRETARY
Name	GODOY, JUAN (RUSTY)
Address	700 NW 1ST AVE, STE. 1620
City-State-Zip:	MIAMI FL 33136

Title	VP
Name	ANDERSON, MAURICIO H
Address	700 NW 1ST AVE, STE. 1620
City-State-Zip:	MIAMI FL 33136

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: KOLLEEN COBB

VP

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date