

2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M16000006191

Entity Name: COUNTYLINE 2 LLC

Current Principal Place of Business:

117 NE 1ST AVENUE, 11TH FLOOR
MIAMI, FL 33132

Current Mailing Address:

117 NE 1ST AVENUE, 11TH FLOOR
MIAMI, FL 33132 US

FEI Number: 37-1856776

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
117 NE 1ST AVENUE, 11TH FLOOR
MIAMI, FL 33132 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title P
Name SUTTON, CHRISTOPHER J
Address 117 NE 1ST AVENUE, 11TH FLOOR
City-State-Zip: MIAMI FL 33132

Title VP,S
Name COBB, KOLLEEN
Address 117 NE 1ST AVENUE, 11TH FLOOR
City-State-Zip: MIAMI FL 33132

Title VP, T
Name GODOY, JUAN (RUSTY)
Address 117 NE 1ST AVENUE, 11TH FLOOR
City-State-Zip: MIAMI FL 33132

Title VP, ASST. SECRETARY
Name MARTINEZ, MARGARITA M
Address 117 NE 1ST AVENUE, 11TH FLOOR
City-State-Zip: MIAMI FL 33132

Title VP
Name ANDERSON, MAURICIO H
Address 117 NE 1ST AVENUE, 11TH FLOOR
City-State-Zip: MIAMI FL 33132

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 O.P. COBB

VICE PRESIDENT

04/24/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date