

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 13, 2002 8:00 am**  
**Secretary of State**

03-13-2002 90018 047 \*\*\*\*50.00

**DOCUMENT #** L00000003845

**1. Entity Name**

GARDENS PROPERTIES, LLC

**DO NOT WRITE IN THIS SPACE**

**2. Principal Place of Business**

**3. Mailing Address**

2875 NW 77th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Miami, FL 33122

Zip

Country

Zip

Country

**4. FEI Number**

65-1021159

Applied For

Not Applicable

**5. Certificate of Status Desired** ☐

**\$5.00** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE  
IN THIS SPACE**

**7. Name and Address of Current Registered Agent**

Name

Firpo Garcia

Street Address (P.O. Box Number is Not Acceptable)

2875 NW 77th Avenue

Miami, FL 33122

City

**FL**

Zip Code

**8. 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**

Signature, typed or printed name of registered agent and title if applicable.

DATE

**FEE IS \$50.00**

**Make Check Payable to Department of State  
DUE BY MAY 1**

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sole Member Firpo Garcia 2875 NW 77 Avenue Miami, FL 33122	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E083B (12/01)

**11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.**

**SIGNATURE:**

*Firpo Garcia*

2.28.02

305.597.5576