## 2016 FLORIDA LIMITED PARTNERSHIP REINSTATEMENT

DOCUMENT# A08000000951

Entity Name: ANA JUAN DAVID FAMILY LIMITED LIABILITY LIMITED

**PARTNERSHIP** 

## **Current Principal Place of Business:**

9305 SW 122 LANE MIAMI, FL 33176

**Current Mailing Address:** 

351 NW 42 AVENUE

503

MIAMI, FL 33126

FEI Number: 26-3726352 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCES, JUAN M 9305 SW 122 LANE MIAMI, FL 33176 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: JUAN M GARCES 11/01/2016

Electronic Signature of Registered Agent

Date

FILED Nov 01, 2016

**Secretary of State** 

CR2049353596

**General Partner Detail:** 

Document #

Name GARCES, M.D., JUAN TRUSTEE

Address 9305 SW 122 LANE
City-State-Zip: MIAMI FL 33176

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARCES, M.D., JUAN TRUSTEE

11/01/2016