#### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000093024

Entity Name: GABLES OFFICE BUILDING LLC

FILED Feb 20, 2019 Secretary of State 6093013233CC

# **Current Principal Place of Business:**

3211 PONCE DE LEON BLVD., SUITE 301

CORAL GABLES, FL 33134

## **Current Mailing Address:**

3211 PONCE DE LEON BLVD., SUITE 301 CORAL GABLES, FL 33134 US

FEI Number: 46-3014907 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

ZOVLOCK, LYNN 8730 NW 36 AVENUE MIAMI, FL 33147 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 MGR Title MANAGER

Name BARKER, REX M Name MILTON, JOSEPH

Address 3211 PONCE DE LEON BLVD., SUITE Address 3211 PONCE DE LEON BLVD., SUITE

301

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MANAGER Title MANAGER

Name MILTON, CECIL Name MILTON, FRANK

Address 3211 PONCE DE LEON BLVD., SUITE Address 3211 PONCE DE LEON BLVD., SUITE

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

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.