## 2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000049969

Entity Name: GARDEN VIEW ESTATES, LLC

**Current Principal Place of Business:** 

2121 PONCE DE LEON BLVD **SUITE 1050** 

CORAL GABLES, FL 33134

**Current Mailing Address:** 

2121 PONCE DE LEON BLVD **SUITE 1050** 

CORAL GABLES, FL 33134 US

FEI Number: 20-2889602 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONSULTING SERVICES OF SOUTH FLORIDA, INC 2121 PONCE DE LEON BLVD **SUITE 1050** CORAL GABLES, FL 33134 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: ANTONIO GARCIA 12/15/2015

> Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

CENTURION MANAGEMENT Name Name ARGYLL TRUST COMPANY LIMITED

SERVICES LTD Address

2ND FLOOR, 625 KINGS ROAD Address NERINE CHAMBERS, PO BOX 905

NORTH POINT XXXX City-State-Zip: City-State-Zip: ROAD TOWN, TORTOLA, BVI XX XX

Title MGR

Name GARCIA, ANTONIO

2121 PONCE DE LEON BLVD. SUITE Address

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.

12/15/2015 SIGNATURE: ANTONIO GARCIA **MANAGER** 

**FILED** Dec 15, 2015

**Secretary of State** 

CR4045906106