2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000053023

Entity Name: EST LAKE WALES LLC

Current Principal Place of Business:

2875 N.E. 191 STREET, PH1 AVENTURA, FL 33180

Current Mailing Address:

2875 N.E. 191 STREET, PH1 AVENTURA, FL 33180

FEI Number: 16-1729735

Name and Address of Current Registered Agent:

KLEIN, TED 8030 PETERS ROAD, SUITE D-104 PLANTATION, FL 33324 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

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SREDNI, ERWIN	Name	SREDNI, CAREN
Address	2875 NE 191 STREET, PH 1	Address	2875 NE 191 STREET PH1
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
Title	MGR		
Name	TABACINIC, FELA		
Address	2875 NE 191 STREET PH1		
City-State-Zip:	AVENTURA FL 33180		
	Name Address City-State-Zip: Title Name Address	NameSREDNI, ERWINAddress2875 NE 191 STREET, PH 1City-State-Zip:AVENTURA FL 33180TitleMGRNameTABACINIC, FELAAddress2875 NE 191 STREET PH1	NameSREDNI, ERWINNameAddress2875 NE 191 STREET, PH 1AddressCity-State-Zip:AVENTURA FL 33180City-State-Zip:TitleMGRCity-State-Zip:NameTABACINIC, FELALity-State-Zip:Address2875 NE 191 STREET PH1Lity-State-Zip:

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: ERWIN SREDNI

MANGER

04/17/2017 Date

Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 17, 2017 Secretary of State CC0220237677

Certificate of Status Desired: No