

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000011654

Entity Name: SYLVIA M. URRECHAGA, P.L.

Current Principal Place of Business:

3211 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134

Current Mailing Address:

3211 PONCE DE LEON BLVD.
SUITE 200
CORAL GABLES, FL 33134 US

FEI Number: 20-4298556

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

URRECHAGA, SYLVIA M
3211 PONCE DE LEON BLVD.
SUITE 200
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name URRECHAGA, SYLVIA M
Address 3211 PONCE DE LEON BLVD., SUITE
200
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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SYLVIA URRECHAGA

MANAGER

04/12/2013

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date