

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000102594

Entity Name: FTELY AVE, LLC**Current Principal Place of Business:**8335 NW 56TH ST
DORAL, FL 33166**Current Mailing Address:**15476 NW 77TH CT
338
MIAMI LAKES, FL 33016**FEI Number:** 26-1615449**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**VIVIAN A. JAIME, P.A.
2900 BISCAYNE BLVD.
STE 500
MIAMI, FL 33137 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	VIVIAN A. JAIME, P.A.
Address	2900 BISCAYNE BLVD- STE 500
City-State-Zip:	MIAMI FL 33137

Title	MANAGER
Name	JAIME, CAMILO M
Address	15476 NW 77TH CT # 338
City-State-Zip:	MIAMI LAKES FL 33016

Title	MANAGER
Name	JAIME, VIVIAN G
Address	15476 NW 77TH CT # 338
City-State-Zip:	MIAMI LAKES FL 33016

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: VIVIAN JAIME

MANANGER

01/23/2020

Electronic Signature of Signing Authorized Person(s) Detail_____
Date