

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000084237

**Entity Name:** LAW OFFICES OF ANDELL K. BROWN, ESQ., P. L.

**Current Principal Place of Business:**

1801 NE 123RD ST.  
SUITE 409  
MIAMI, FL 33181

**Current Mailing Address:**

1801 NE 123RD ST.  
SUITE 409  
MIAMI, FL 33181 US

**FEI Number:** 32-0265462

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BROWN, ANDELL KESQ.  
1801 NE 123RD ST.  
SUITE 409  
MIAMI, FL 33181 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 BROWN, ANDELL K ESQ.  
Address 1801 NE 123RD ST.  
SUITE 409  
City-State-Zip: MIAMI FL 33181

*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:** ANDELL BROWN

MGR

05/01/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date