

2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000089786

Entity Name: COSTA NURSERY FARMS LLC**Current Principal Place of Business:**19000 SW 192 STREET
MIAMI, FL 33187**Current Mailing Address:**21800 SW 162 AVE
MIAMI, FL 33170 US**FEI Number:** 47-3712491**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DE ONA, ARIANNA CABRERA
21800 SW 162 AVE
MIAMI, FL 33170 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:** ARIANNA CABRERA DE ONA

04/06/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name COSTA, JOSE A III
Address 21800 SW 162 AVE
City-State-Zip: MIAMI FL 33170

Title MGR
Name SMITH, JOSE I III
Address 21800 SW 162 AVE
City-State-Zip: MIAMI FL 33170

Title MGR
Name LUSARDI, JOSEPH
Address 321 OCEAN DRIVE
#900/90
City-State-Zip: MIAMI BEACH FL 33139

Title MGR
Name PALLIATECH FLORIDA LLC
Address 321 OCEAN DRIVE
#900/90
City-State-Zip: MIAMI BEACH FL 33139

Title MGR
Name CROWN, ROBERT
Address 3333 RUM ROW
City-State-Zip: NAPLES FL 34102

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: JOSE A. COSTA, III

MANAGER

04/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date