## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000069003

Entity Name: TWO OCEANS 63, LLC

**Current Principal Place of Business:** 

SUNRISE, FL 33325

440 SAWGRASS CORPORATE PKWY, STE 212

## **Current Mailing Address:**

440 SAWGRASS CORPORATE PKWY, STE 212 SUNRISE, FL 33325

FEI Number: 27-0587583 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CANO, ELIZABETH 10700 NW 66 STREET APT 514 MIAMI, FL 33178 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:

City-State-Zip:

Electronic Signature of Registered Agent

107-7

107-7

Authorized Person(s) Detail :

107-7

Title MGRM Title MGRM

Name DIAZ PEREZ, PASTOR F Name GIORGINI, ALBERTO

Address 440 SAWGRASS CORPORATE PKWY, Address 440 SAWGRASS CORPORATE PKWY,

STE 212 STE 212

City-State-Zip: SUNRISE FL 33325 City-State-Zip: SUNRISE FL 33325

Title MGRM Title MGRM

Name GIORGINI, MARIA C Name GIORGINI BELLAPIANTA, VITO R

Address 10870 NW 88 TERRACE Address 10870 NW 88 TERRACE

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MIAMI FL 33178 City-State-Zip: MIAMI FL 33178

Title MGRM Title MGRM

Name RODRIGUEZ, MARIA I Name GIORGINI BELLAPIANTA, VITO R

Address 10870 NW 88 TERRACE Address 10870 NW 88 TERRACE

City-State-Zip: MIAMI FL 33178 City-State-Zip: MIAMI FL 33178

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: ALBERTO GIORGINI MGRM

Electronic Signature of Signing Authorized Person(s) Detail

04/29/2019 Date

FILED Apr 29, 2019

**Secretary of State** 

9275894633CC

Date