

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000046540

**Entity Name:** 1202 BISCAYNE PLAZA, LLC

**Current Principal Place of Business:**

6102 NW 114 COURT, # 104  
MIAMI, FL 33178

**Current Mailing Address:**

11385 NW 66 TH STREET  
MIAMI, FL 33178 US

**FEI Number:** 68-0680490

**Certificate of Status Desired:** No

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

GBS CONSULTANTS, INC  
3350 SW 148 AVE.  
SUITE 120 □  
MIRAMAR, FL 33027 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                   | Title           | MGR                   |
| Name            | FOLCHI, NICOLA        | Name            | TOGANDI, NATHALY      |
| Address         | 11385 NW 66 TH STREET | Address         | 11385 NW 66 TH STREET |
| 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:** NICOLA FOLCHI

**MGR**

**02/26/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date