

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000062223

**Entity Name:** 1295 SHORE LLC

**Current Principal Place of Business:**

9400 NW 12TH AVE BAY 1  
MIAMI, FL 33150

**Current Mailing Address:**

9400 NW 12 AVE BAY 1  
BAY 1  
MIAMI, FL 33150 US

**FEI Number:** 27-2814454

**Certificate of Status Desired:** Yes

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

BREZAULT, ALANDE MD  
9400 NW 12TH AVE BAY 1  
MIAMI, FL 33150 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	MGRM	Title	MGR
Name	BREZAULT, ALANDE M.D.	Name	INNOCENT, CLAUDE AM.D.
Address	9400 NW 12TH AVE BAY 1	Address	9400 NW 12TH AVE BAY 1
City-State-Zip:	MIAMI FL 33150	City-State-Zip:	MIAMI FL 33150

*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:** CLAUDE INNOCENT

**MANAGER**

**01/24/2018**

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

\_\_\_\_\_  
Date