| 5955 PONCE DE LEON BLVD CORAL GABLES, FL 33146 US | | | | |
|--|--|--------------------------------------|--|-------------|
| The above nam | ned entity submits this statement for the purpose of | changing its registered office or re | egistered agent, or both, in the State | of Florida. |
| SIGNATUF | RE: MEERALI PATEL | | | 03/16/2017 |
| | Electronic Signature of Registered Age | nt | | Date |
| Authorized | d Person(s) Detail : | | | |
| Title | DIRECTOR | Title | DIRECTOR | |
| Name | PEREZ, JORGE MD | Name | TANO, ALBERT MD | |

Address

City-State-Zip:

CORAL GABLES, FL 33146

Current Mailing Address:

5955 PONCE DE LEON BLVD

5955 PONCE DE LEON BLVD CORAL GABLES. FL 33146

FEI Number: 27-3373536

Name and Address of Current Registered Agent:

5955 PONCE DE LEON BLVD

City-State-Zip: CORAL GABLES FL 33146

PATEL, MEERALI 5955 PO CORAL

Address

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: JORGE PEREZ

DIRECTOR

03/16/2017

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000089986

Entity Name: 2600 IMMOKALEE, LLC

Current Principal Place of Business:

Secretary of State CC3919147156

FILED Mar 16, 2017

Certificate of Status Desired: No

5955 PONCE DE LEON BLVD

CORAL GABLES FL 33146

Electronic Signature of Signing Authorized Person(s) Detail

Date