

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000085115

**Entity Name:** MASSARI SYLVIE LLC

**Current Principal Place of Business:**

821 COLLINS AVE 504  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

20200 NE 12TH COURT  
MIAMI, FL 33179 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MASSARI, ARTEMIO  
20200 NE 12TH COURT  
MIAMI, FL 33179 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:** ARTEMIO MASSARI

02/01/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MASSARI, ARTEMIO  
Address 20200 NE 12TH COURT  
City-State-Zip: MIAMI FL 33179

*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:** ARTEMIO MASSARI

MANAGER

02/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date