FEI Number: 46-2196165		Certificate of Status Desired
Name and Address of Current	Registered Agent:	
YELEN, JAN A 1104 PONCE DE LEON BOULEVARD CORAL GABLES, FL 33134 US		
The above named entity submits this stateme	nt for the purpose of changing its registered office or	registered agent, or both, in the State of Florida.
SIGNATURE: JAN A YELEN		03/
<b>-</b>		

DOCUMENT# L12000117740	

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Entity Name: 1001-1005 SW 27TH AVE., LLC

### **Current Principal Place of Business:**

7250 SW 39 TERR MIAMI, FL 33155

#### **Current Mailing Address:**

P.O. BOX 430827 MIAMI, FL 33243

# FE

### Na

SIGNATURE:	JAN A YELEN			03/12/2024		
	Electronic Signature of Registered Agent			Date		
Authorized Person(s) Detail :						
Title	MGR	Title	MGR			
Name	KLOTZ, MARIANN	Name	KLOTZ, MICHAEL			
Address	P.O. BOX 430827	Address	P.O. BOX 430827			
City-State-Zip:	MIAMI FL 33243	City-State-Zip:	MIAMI FL 33243			

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: MARIANN KLOTZ

MANAGER

03/12/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

## FILED Mar 12, 2024 **Secretary of State** 8599008047CC

d: No