

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000120228

Entity Name: MORAVICEN II LLC

Current Principal Place of Business:

5011 NW 93RD DORAL CIRCLE E
MIAMI, FL 33178

Current Mailing Address:

5011 NW 93RD DORAL CIRCLE EAST
MIAMI, FL 33178 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MORALES, INGRID C
5011 NW 93RD DORAL CIRCLE E
MIAMI, FL 33178 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	MANAGER
Name	MORALES, GILBERTO E	Name	MORALES, SYLVIA C
Address	5011 NW 93RD DORAL CIRCLE E	Address	5011 NW 93RD DORAL CIRCLE E
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: GILBERTO E MORALES

MANAGER

01/12/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date