### 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000017382

Entity Name: GRANDVALET ENTERPRISES -1, LLC

ntity Name: GRANDVALET ENTERPRISES -1, LI

# **Current Principal Place of Business:**

166 ALHAMBRA CIRCLE SUITE 200 CORAL GABLES, FL 33134

## **Current Mailing Address:**

2222 PONCE DE LEON BLVD SUITE 300 IMAGE ME CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

STUDER, LEA 2222 PONCE DE LEON BLVD SUITE 300 IMAGE ME CORAL GABLES, FL 33134 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: LEA STUDER 02/06/2019

Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGR

Name STUDER, LEA

Address 2222 PONCE DE LEON BLVD

SUITE 300 IMAGE ME

City-State-Zip: CORAL GABLES FL 33134

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: LEA GRANDVALET STUDER

MGR

02/06/2019

FILED Feb 06, 2019

**Secretary of State** 

9474301202CC

Date