

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000053017

Entity Name: 28001 SW 143 CT., LLC

Current Principal Place of Business:

18901 SW 359 ST.
HOMESTEAD, FL 33034

Current Mailing Address:

18901 SW 359 ST.
HOMESTEAD, FL 33034

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HILLER, DOUGLAS C ESQ.
3132 PONCE DE LEON BLVD.
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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name CHRISTIANS, DARRELL N
Address 18901 SW 359 ST.
City-State-Zip: HOMESTEAD FL 33034

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: DARRELL CHRISTIANS

MANAGER

04/14/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date