

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000127488

**Entity Name:** MENENDEZ INVESTMENTS LLC

**Current Principal Place of Business:**

10290 SW 32 ST  
MIAMI, FL 33165

**Current Mailing Address:**

P.O. BOX 523527  
MIAMI, FL 33152

**FEI Number:** 47-1692948

**Certificate of Status Desired:** No

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

MENENDEZ, BRYAN  
6032 SW 127 PL  
MIAMI, FL 33183 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 MGRM  
Name MENENDEZ, BRYAN  
Address 6032 SW 127 PL  
City-State-Zip: MIAMI FL 33183

Title MGRM  
Name MENENDEZ, DAVID  
Address 6032 SW 127 PL  
City-State-Zip: MIAMI FL 33183

Title MGRM  
Name MENENDEZ, RANDY  
Address 6234 SW 127 PL  
City-State-Zip: MIAMI FL 33183

Title MGRM  
Name MENENDEZ, RAYMOND  
Address 10290 SW 32 ST  
City-State-Zip: MIAMI FL 33165

Title MGRM  
Name MENENDEZ, MARLENE  
Address 4250 SW 130 CT  
City-State-Zip: MIAMI FL 33175

*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:** RANDY MENENDEZ

**MGRM**

**04/08/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date