

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000184055

Entity Name: 1651SW, LLC

**Current Principal Place of Business:**

1651 SW 2 STREET  
MIAMI , FL 33135

**FILED**  
**Mar 01, 2018**  
**Secretary of State**  
**CC2885007211**

**Current Mailing Address:**

6538 COLLINS AVE  
SUITE 314  
MIAMI BEACH, FL 33141 US

FEI Number: 47-2443169

Certificate of Status Desired: No

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

LAM, CYNTHIA K  
6538 COLLINS AVE  
SUITE 314  
MIAMI BEACH, FL 33141 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: CYNTHIA K LAM

03/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER
Name	LAM, CYNTHIA K
Address	6538 COLLINS AVE SUITE 314
City-State-Zip:	MIAMI BEACH FL 33141
Title	AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
Name	CASTRILLO, ALEJANDRO
Address	6538 COLLINS AVE SUITE 314
City-State-Zip:	MIAMI BEACH FL 33141

Title	AUTHORIZED REPRESENTATIVE, MANAGER
Name	ARNAUD, KAREN
Address	6538 COLLINS AVE SUITE 314
City-State-Zip:	MIAMI BEACH FL 33141
Title	AUTHORIZED MEMBER, AUTHORIZED REPRESENTATIVE
Name	LAM, ALEX
Address	6538 COLLINS AVE SUITE 314
City-State-Zip:	MIAMI BEACH FL 33141

*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: ALEX LAM

MEMBER

03/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date