

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000030746

Entity Name: 19659 RIVERSIDE DR WEST LLC

Current Principal Place of Business:

505 S FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33401

Current Mailing Address:

505 S FLAGLER DRIVE, SUITE 900
WEST PALM BEACH, FL 33401

FEI Number: 47-3501264

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HAILE, SHAW & PFAFFENBERGER, P.A.
660 U.S. HIGHWAY ONE-THIRD
NORTH PALM BEACH, FL 33408 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 GAVIDIA, CARLOS
Address 505 S FLAGLER DRIVE, SUITE 900
City-State-Zip: WEST PALM BEACH FL 33401

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: CARLOS GAVIDIA

MGR

02/10/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date