

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000114644

**Entity Name:** 9936 NW 41ST UNIT 19, LLC

**Current Principal Place of Business:**

3554 ESTEPONA AVE.  
DORAL, FL 33178

**Current Mailing Address:**

3554 ESTEPONA AVE.  
DORAL, FL 33178 US

**FEI Number:** 47-4512589

**Certificate of Status Desired:** No

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

ARMENTEROS, MARTA  
3554 ESTEPONA AVE.  
DORAL, FL 33178 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 AUTHORIZED MEMBER  
Name ARMENTEROS, MARTA  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

Title MANAGER  
Name CUPELLO, CAROLINA  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

Title MANAGER  
Name CUPELLO, ENRIQUE  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

Title MANAGER  
Name CUPELLO, VERONICA  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

Title MANAGER  
Name CUPELLO, MARTA  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

Title MANAGER  
Name CUPELLO, FRANCISCO  
Address 3554 ESTEPONA AVE.  
City-State-Zip: DORAL FL 33178

*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:** MARTA ARMENTEROS

**REGISTERED AGENT**

**04/06/2017**

Electronic Signature of Signing Authorized Person(s) Detail

Date