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

SIGNATURE: VICTOR TORRES	MGRM	03/24/2023
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DOCUMENT# L15000156882

Entity Name: VILLAS OF SHENANDOAH 1814 LLC

Current Principal Place of Business:

1814 SW 22 AVE MIAMI, FL 33145

Current Mailing Address:

370 MIRACLE MILE FLOOR 2 CORAL GABLES, FL 33134 US

FEI Number: 47-5045355

Name and Address of Current Registered Agent:

VADILLO, MANUEL 11402 NW 41 STREET SUITE 202 DORAL, FL 33178 US

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

City-State-Zip: CORAL GABLES FL 33134

Title	MGRM	Title	MGRM
Name	TORRES, VICTOR ALEXIS	Name	MELO, PETER
Address	370 MIRACLE MILE FLOOR 2	Address	370 MIRACLE MILE FLOOR 2
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134
Title	MGRM		
Name	LINDHAGEN, EDWARD		
Address	370 MIRACLE MILE FLOOR 2		

that my name appears above, or on an attachment with all other like empowered.

Electronic Sign	ature of Signir	ng Authorized	Person(s) Detail

FILED Mar 24, 2023 Secretary of State 9916571606CC

Date

Certificate of Status Desired: No

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.