

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000181478

**Entity Name:** LAS 4A, LLC

**Current Principal Place of Business:**

1300 PONCE DE LEON BLVD APT 1207  
CORAL GABLES, FL 33134

**Current Mailing Address:**

999 PONCE DE LEON BLVD., SUITE 650  
CORAL GABLES, FL 33134 US

**FEI Number:** 47-5429715

**Certificate of Status Desired:** No

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

AXIAL MANAGEMENT SERVICES, LLC  
999 PONCE DE LEON BLVD., SUITE 650  
CORAL GABLES, FL 33134 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:** HIRAM OCARIZ

04/24/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            AUTHORIZED MEMBER  
Name            FIDDOR LLC  
Address        160 GREENTREE DR STE 101  
City-State-Zip: DOVER DE 19904

*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:** HIRAM OCARIZ

RA

04/24/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date