

**2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000195033

**Entity Name:** 9111 SW 20 STREET LLC

**Current Principal Place of Business:**

C/O AUGUSTO LAW GROUP, P.A.  
201 ALHAMBRA CIRCLE, SUITE 1200  
CORAL GABLES, FL 33134

**Current Mailing Address:**

C/O AUGUSTO LAW GROUP, P.A.  
201 ALHAMBRA CIRCLE, SUITE 1200  
CORAL GABLES, FL 33134 US

**FEI Number:** 81-5248817

**Certificate of Status Desired:** No

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

AUGUSTO, JACQUELINE ESQ.  
201 ALHAMBRA CIRCLE  
SUITE 1200  
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:** JACQUELINE AUGUSTO

02/06/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AR  
Name AUGUSTO, JACQUELINE ESQ.  
Address 201 ALHAMBRA CIRCLE, SUITE 1200  
City-State-Zip: CORAL GABLES FL 33134

Title AMBR  
Name LOPEZREY, VIRGINIA  
Address 140 JEFFERSON AVENUE, #14002  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name LOPEZ, MAXIMINO O  
Address 14520 SW 115 TERRACE  
City-State-Zip: MIAMI FL 33186

*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:** JACQUELINE AUGUSTO

ATTORNEY

02/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date