

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000195409

Entity Name: 1929 NW, LLC

Current Principal Place of Business:

5760 SW 8 STREET
SUITE 500
MIAMI, FL 33144

Current Mailing Address:

POST OFFICE BOX 14-4389
CORAL GABLES, FL 33114 US

FEI Number: 47-5649900

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICOLAS FERNANDEZ, P.A.
5760 SW 8 STREET
SUITE 500
MIAMI, FL 33144 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 ALVAREZ, CESAR
Address POST OFFICE BOX 14 - 4389
City-State-Zip: CORAL GABLES FL 33114

Title MGR
Name ALVAREZ, CESAR A
Address POST OFFICE BOX 144389
City-State-Zip: CORAL GABLES FL 33114

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: CESAR ALVAREZ

MGR

04/18/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date