

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000197671

**Entity Name:** VILLAS OF MENDOZA 324 LLC

**Current Principal Place of Business:**

324 MENDOZA AVENUE  
CORAL GABLES, FL 33134

**Current Mailing Address:**

320 MIRACLE MILE  
SUITE 201  
CORAL GABLES, FL 33134

**FEI Number:** 47-5651479

**Certificate of Status Desired:** No

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

VADILLO, MANUEL  
11402 NW 41 STREET  
SUITE 202  
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 MBR  
Name LINDHAGEN, EDWARD  
Address 320 MIRACLE MILE, STE 201  
City-State-Zip: CORAL GABLES FL 33134

Title MMBR  
Name TORRES, VICTOR  
Address 320 MIRACLE MILE, STE 201  
City-State-Zip: CORAL GABLES FL 33134

Title MMBR  
Name MELO, PETER  
Address 320 MIRACLE MILE, STE 201  
City-State-Zip: CORAL GABLES FL 33134

*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:** VICTOR A TORRES

MMBR

02/11/2016

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date