2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT DOCUMENT\# L15000203248

Entity Name: CC REALTY SERVICES, LLC

## Current Principal Place of Business:

135 SAN LORENZO AVE STE 740
CORAL GABLES, FL 33146

## Current Mailing Address:

135 SAN LORENZO AVE STE 740
CORAL GABLES, FL 33146 US
FEI Number: 27-1739481
Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

EISENACHER, HAROLD
135 SAN LORENZO AVE STE 740
CORAL GABLES, FL 33146 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:
HAROLD EISENACHER
04/07/2016
Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

| Title | AUTHORIZED REPRESENTATIVE | Title | PRESIDENT |
| :--- | :--- | :--- | :--- |
| Name | SANCHEZ, LORRAINE | Name | CARR, JAMES |
| Address | 135 SAN LORENZO AVE STE 740 | Address | 135 SAN LORENZO AVE STE 740 |
| City-State-Zip: | CORAL GABLES FL 33146 | City-State-Zip: | CORAL GABLES FL 33146 |
| Title | VP, TREASURER, ASST. SECRETARY | Title | VP, SECRETARY, ASST. TREASURER |
| Name | EISENACHER, HAROLD | Name | MIYARES, ANDRES |
| Address | 135 SAN LORENZO AVE STE 740 | Address | 135 SAN LORENZO AVE STE 740 |
| City-State-Zip: | CORAL GABLES FL 33146 | City-State-Zip: | CORAL GABLES FL 33146 |

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04/07/2016


[^0]:    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.

