# 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: EMMANUEL UCHE

Electronic Signature of Signing Authorized Person(s) Detail

#### DOCUMENT# L16000011675

Entity Name: EAST COAST DEVELOPMENT ENTERPRISE LIMITED LIABILITY COMPANY

### **Current Principal Place of Business:**

11200 S.W. 136 STREET N/A MIAMI, FL 33176

## **Current Mailing Address:**

11200 S.W.136 STREET N/A MIAMI, FL 33176 US

## FEI Number: 81-1183871

## Name and Address of Current Registered Agent:

UCHE, EMMANUEL O 11200 S.W.136 STREET N/A MIAMI, FL 33176 US

The above na

#### SIGNATL EMMANUEL UCHE

#### Authorized Person(s) Detail :

Title MGR UCHE, EMMANUEL O Name 11200 S.W. 136 STREET Address City-State-Zip: MIAMI FL 33176

named entity submits this statement for the purpose of changing its registered office or registered agent, o	r both, in the State of Florida.
URE: EMMANUEL LICHE	06/22/2019

Electronic Signature of Registered Agent

IVIAI	VAG	EK	

Date

06/22/2019

Date

# FILED Jun 22, 2019 Secretary of State 0493754649CC

Certificate of Status Desired: No