

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000119420

Entity Name: 439 NW 20TH AVE LLC

Current Principal Place of Business:

800 WEST AVENUE APT 915
MIAMI BEACH, FL 33139

Current Mailing Address:

800 WEST AVENUE APT 915
MIAMI BEACH, FL 33139 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RONDIN, ALEX
800 WEST AVENUE APT 915
MIAMI BEACH, FL 33139 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 AMBR
Name BEN AHARON, SHLOMY
Address GERSHOM 2
City-State-Zip: RAMAT GAN IS 52286-37

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: BEN AHARON SHLOMY

OWNER

03/18/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date