

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000161973

Entity Name: 3B WORKS LLC**Current Principal Place of Business:**2020 PONCE DE LEON BLVD
PH-2
CORAL GABLES, FL 33134**Current Mailing Address:**2020 PONCE DE LEON BLVD
PH-2
CORAL GABLES, FL 33134 US**FEI Number:** 81-3694972**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOPEZ, MARK A.
2020 PONCE DE LEON BLVD
PH-2
CORAL GABLES, FL 33134 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:** MARK A. LOPEZ

03/16/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	CISNEROS, EDUARDO E
Address	2020 PONCE DE LEON BLVD, PH-2
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	CISNEROS, ANDRES E
Address	2020 PONCE DE LEON BLVD, PH-2
City-State-Zip:	CORAL GABLES FL 33134

Title	MGR
Name	CISNEROS, HENRIQUE J
Address	2020 PONCE DE LEON BLVD, PH-2
City-State-Zip:	CORAL GABLES FL 33134

Title	VP OF OPERATIONS
Name	MAGUAL, RAMON
Address	2020 PONCE DE LEON BLVD. PH-2
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: RAMON MAGUAL

VP OF OPERATIONS

03/16/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date