

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000180244

**FILED**  
**Jun 12, 2020**  
**Secretary of State**  
**5884976803CC**

**Entity Name:** ALTA AVE APTS LLC

**Current Principal Place of Business:**

888 BRICKELL AVE  
100  
MIAMI, FL 33131

**Current Mailing Address:**

888 BRICKELL AVE  
SUITE 100  
MIAMI, FL 33131 US

**FEI Number:** 81-3998107

**Certificate of Status Desired:** No

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

SISISKY, DANIEL  
888 BRICKELL AVE  
SUITE 100  
MIAMI, FL 33131 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           MANAGER  
Name           SISISKY, DANIEL  
Address        888 BRICKELL AVE  
                  SUITE 100  
City-State-Zip: MIAMI FL 33131

Title           MANAGER  
Name           ZAMPELL, JACK  
Address        549-4 AMSTERDAM AVE. NE  
City-State-Zip: ATLANTA GA 30306

Title           MANAGER  
Name           SCHOTTENSTEIN, JEFF  
Address        888 BRICKELL AVE  
                  SUITE 100  
City-State-Zip: MIAMI FL 33131

*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:** DANIEL SISISKY

**MANAGER**

**06/12/2020**

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

\_\_\_\_\_  
Date