

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000222865

**Entity Name:** CYBER INNOVATION RISK, LLC.

**Current Principal Place of Business:**

C/O RECALDE LAW FIRM 10800 BISCAYNE BLVD  
STE 988  
MIAMI, FL 33161

**Current Mailing Address:**

C/O RECALDE LAW FIRM 10800 BISCAYNE BLVD  
STE 988  
MIAMI, FL 33161 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

RECALDE LAW FIRM, P.A.  
10800 BISCAYNE BLVD  
STE 988  
MIAMI, FL 33161 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:** RAFAEL RECALDE

04/08/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name TRAQUET, JAVIER C  
Address C/O 10800 BISCAYNE BLVD., STE 988  
City-State-Zip: MIAMI FL 33161

*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:** JAVIER C TRAQUET

MGR

04/08/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date