

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000001190

**FILED**  
**Feb 12, 2019**  
**Secretary of State**  
**5153102893CC**

**Entity Name:** RAMON MARISTANY ASSOCIATES, LLC.

**Current Principal Place of Business:**

1651 NW 29TH CT  
MIAMI, FL 33125

**Current Mailing Address:**

1651 NW 29TH CT  
MIAMI, FL 33125

**FEI Number: 82-4470316**

**Certificate of Status Desired: No**

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

MARISTANY, RAMON  
1651 NW 29TH CT  
MIAMI, FL 33125 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	AMGR	Title	AUTHORIZED MEMBER
Name	MARISTANY, RAMON	Name	MARISTANY, BELKIS
Address	1651 NW 29TH CT	Address	1651 NW 29TH CT
City-State-Zip:	MIAMI FL 33125	City-State-Zip:	MIAMI FL 33125

Title AUTHORIZED MEMBER  
Name MARISTANY, ANTHONY JOHN  
Address 1651 NW 29TH CT  
City-State-Zip: MIAMI FL 33125

*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: BELKIS MARISTANY**

**AUTHORIZED MEMBER**

**02/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date