

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000057015

**Entity Name:** 7477 SW 82ND STREET, UNIT C319, LLC

**Current Principal Place of Business:**

1560 SOPERA AVE  
CORAL GABLES, FL 33134-6248

**Current Mailing Address:**

1560 SOPERA AVE  
CORAL GABLES, FL 33134-6248 US

**FEI Number:** 82-0791627

**Certificate of Status Desired:** No

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

RA CORPORATE SERVICES, INC.  
9400 S DADELAND BLVD, STE 600  
MIAMI, FL 33156 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 MGR  
Name SAMPER, FERNANDA RAMOS  
Address 1560 SOPERA AVE  
City-State-Zip: CORAL GABLES FL 33134-6248

Title MGR  
Name SAMPER, MARIO MANUEL  
Address 1560 SOPERA AVE  
City-State-Zip: CORAL GABLES FL 33134-6248

*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:** MARIO MANUEL SAMPER

**MANAGER**

**01/18/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date