

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000078935

**Entity Name:** MEDLEY 6920, LLC

**Current Principal Place of Business:**

6920 N.W 77 TERRACE  
MEDLEY, FL 33166

**Current Mailing Address:**

19475 SW 204 STREET  
MIAMI, FL 33187 US

**FEI Number:** 82-1255937

**Certificate of Status Desired:** No

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

ABBOTT, ELIOT ESQ.  
2525 PONCE DE LEON  
4TH FLOOR  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	EC MEDLEY 6920, LLC	Name	VALDES, CARLOS
Address	2525 PONCE DE LEON BLVD., 4TH FLOOR	Address	19475 SW 204 STREET
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	MIAMI FL 33187

*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:** CARLOS A VALDES

**MANAGER**

**04/24/2018**

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

\_\_\_\_\_  
Date