

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000093526

**Entity Name:** PONCE 712 TIC, LLC

**Current Principal Place of Business:**

ATTN: CARMEN FERNANDEZ DE DIAZ  
C/O GERSON PRESTON PA, 4770 BISCAYNE BLVD SUITE 400  
MIAMI, FL 33137

**Current Mailing Address:**

ATTN: CARMEN FERNANDEZ DE DIAZ  
C/O GERSON PRESTON PA, 4770 BISCAYNE BLVD SUITE 400  
MIAMI, FL 33137 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

C/O GERSON PRESTON PA  
4770 BISCAYNE BLVD  
SUITE 400  
MIAMI, FL 33137 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:** GERSON PRESTON PA

06/18/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FERNANDEZ DE DIAZ, CARMEN  
Address C/O GERSON PRESTON PA, 4770  
BISCAYNE BLVD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title MGR  
Name DIAZ GONZALEZ, ANTONIO J  
Address C/O GERSON PRESTON PA, 4770  
BISCAYNE BLVD  
SUITE 400  
City-State-Zip: MIAMI FL 33137

Title MGR  
Name DIAZ FERNANDEZ, ANTONIO J  
Address C/O 4770 BISCAYNE BLVD, 4770  
BISCAYNE BLVD  
SUITE 400  
City-State-Zip: MIAMI BEACH FL 33137

*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:** CARMEN FERNANDEZ DE DIAZ

MGR

06/18/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date