

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000152058

**Entity Name:** PS COLLECTIVE L.L.C.

**Current Principal Place of Business:**

5000 HAMMOCK PARK DRIVE  
CORAL GABLES, FL 33156

**Current Mailing Address:**

5000 HAMMOCK PARK DRIVE  
CORAL GABLES, FL 33156 US

**FEI Number:** 82-2171432

**Certificate of Status Desired:** No

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

SALAZAR, MARIA C  
5000 HAMMOCK PARK DRIVE  
CORAL GABLES, 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 AP  
Name SALAZAR, MARIA C  
Address 5000 HAMMOCK PARK DRIVE  
City-State-Zip: CORAL GABLES FL 33156

*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:** MARIA GABRIELLA CABALLERO SALAZAR

AP

03/21/2018

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

\_\_\_\_\_ Date