

**2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000167165

**Entity Name:** 84TAXLIEN LLC

**Current Principal Place of Business:**

3625 NW 82 AVENUE  
201  
DORAL, FL 33166

**Current Mailing Address:**

3625 NW 82 AVENUE  
201  
DORAL, FL 33166 US

**FEI Number:** 82-2416709

**Certificate of Status Desired:** No

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

GARCIA, FERNANDO  
3625 NW 82 AVENUE  
201  
DORAL, FL 33166 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:** FERNANDO GARCIA

10/17/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GARCIA, FERNANDO  
Address 3625 NW 82 AVENUE  
City-State-Zip: DORAL FL 33166

Title MGR  
Name PUENTE, FLORIBERTO A  
Address 9820 SW 106 AVENUE  
City-State-Zip: MIAMI FL 33176

Title MGR  
Name RODRIGUEZ, JOSE A  
Address 100 SE 2ND STREET, 29TH FLOOR  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name DEL VALLE, JORGE  
Address 844 MALAGA AVENUE  
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER  
Name GUIASOLA, JORGE  
Address 1510 NW 79 AVENUE  
City-State-Zip: DORAL FL 33126

*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:** FERNANDO GARCIA

MANAGER

10/17/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date