

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000008735

Entity Name: CHICARE TROPICAL LLC

Current Principal Place of Business:

551 NW 42ND AVE
APT 712
FORT LAUDERDALE, FL 33317

Current Mailing Address:

551 NW 42ND AVE
APT 712
FORT LAUDERDALE, FL 33317 US

FEI Number: 82-4008950

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CANTAVE, CHRISTELLE
551 NW 42ND AVE
APT 712
FORT LAUDERDALE, FL 33317 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 CANTAVE, CHRISTELLE
Address 551 NW 42ND AVE
APT 712
City-State-Zip: FORT LAUDERDALE FL 33317

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: CANTAVE CHRISTELLE

MS

05/01/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date