

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000060334

**Entity Name:** JACUR PARKLAND TOWN CENTER LLC

**Current Principal Place of Business:**

5600 SW 135 AVE, STE 106R  
MIAMI, FL 33183

**Current Mailing Address:**

5600 SW 135 AVE, STE 106R  
MIAMI, FL 33183 US

**FEI Number: 82-4755454**

**Certificate of Status Desired: No**

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

WEST KENDALL REGISTERED AGENTS, INC  
5600 SW 135 AVE, STE 106R  
MIAMI, FL 33183 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 MGRM  
Name CURE-ORFALE, FAISAL  
Address 5600 SW 135 AVE, STE 106R  
City-State-Zip: MIAMI FL 33183

Title MGR  
Name JACUR HOLDING GROUP LLC  
Address 5600 SW 135 AVE, STE 106R  
City-State-Zip: MIAMI FL 33183

Title MGR  
Name GARCIA-COHEN, ITAMARA  
Address 5600 SW 135 AVE, STE 106R  
City-State-Zip: MIAMI FL 33183

Title MGR  
Name DIAZ-SARMIENTO, GABRIEL SERGIO  
CPA  
Address 5600 SW 135 AVE SUITE 106R  
City-State-Zip: MIAMI FL 33183

*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: GABRIEL SERGIO DIAZ-SARMIENTO**

**MGRM**

**04/28/2022**

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

\_\_\_\_\_  
Date