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: GRISEL MAC WILLIAMS

Electronic Signature of Registered Agent

. 4 1 -

SIGNATURE: GRISEL MAC WILLIAMS

Authorized Person(s) Detail :			
Title	AP	Title	AP
Name	MAC WILLIAMS, GRISEL	Name	DIAZ, MICHEL
Address	810 E 39TH PL	Address	810 E 39TH PL
City-State-Zip:	HIALEAH FL 33013	City-State-Zip:	HIALEAH FL 33013

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.

Name and Address of Current Registered Agent:

16699 COLLINS AVE 3809 SUNNY ISLES BEACH, FL 33160

HIALEAH, FL 33013 UN

MAC WILLIAMS, GRISEL 810 EAST 39TH PLACE HIALEAH, FL 33013 US

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000144507

Entity Name: 16699 COLLINS AVE LLC

Current Principal Place of Business:

Current Mailing Address:

810 E 39TH PL

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

AP

FILED Feb 18, 2022 Secretary of State 1640771379CC

> 02/18/2022 Date

> > Date

02/18/2022