

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000164016

**Entity Name:** SILVESTRI, LLC

**Current Principal Place of Business:**

4570 AVALON ST  
BOCA RATON, FL 33428

**Current Mailing Address:**

6574 N. STATE RD 7 #229  
COCONUT CREEK, FL 33073

**FEI Number:** 83-1169842

**Certificate of Status Desired:** No

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

SILVESTRI, RICHARD D  
6574 N. STATE RD 7  
#229  
COCONUT CREEK, FL 33073 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	SILVESTRI, RICHARD D
Address	4570 AVALON ST
City-State-Zip:	BOCA RATON FL 33428

*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:** RICHARD D SILVESTRI

MGR

06/30/2020

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

\_\_\_\_\_  
Date