

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000282644

Entity Name: FAPIM, LLC

Current Principal Place of Business:

1541 ALGARDI AVENUE
CORAL GABLES, FL 33134

Current Mailing Address:

1541 ALGARDI AVENUE
CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRISTAN BOURGOIGNIE, P.A.
5975 SUNSET DRIVE
603
MIAMI, FL 33143 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	MANAGER	Title	MANAGER
Name	BUTOLLO, ADRIANA	Name	MARGOLOFF, PIERRE
Address	C/O TRISTAN BOURGOIGNIE, P.A. 5975 SUNSET DRIVE SUITE 603	Address	C/O TRISTAN BOURGOIGNIE, P.A. 5975 SUNSET DR SUITE 603
City-State-Zip:	MIAMI FL 33143	City-State-Zip:	MIAMI FL 33143

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: ADRIANA BUTOLLO

MANAGER

04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date