

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000284937

Entity Name: 485 LIVINGSTON, LLC.

Current Principal Place of Business:

815 NW 57 AVE
SUITE 480
MIAMI, FL 33126

FILED
Feb 14, 2023
Secretary of State
4981826305CC

Current Mailing Address:

815 NW 57 AVE
SUITE 480
MIAMI, FL 33126 US

FEI Number: 47-2747195

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LACASA, EDUARDO R
815 NW 57 AVE SUITE 480
MIAMI, FL 33126 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	Title	AMBR
Name	MENENDEZ, MANUEL E	Name	LACASA, EDUARDO R.
Address	815 NW 57 AVE SUITE 480	Address	815 NW 57 AVE SUITE 480
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	AMBR	Title	AMBR
Name	MENENDEZ, MANUEL E. III	Name	VANAC, SUSAN
Address	815 NW 57 AVE SUITE 480	Address	815 NW 57 AVE SUITE 480
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	AMBR	Title	AMBR
Name	PIERRO, MICHAEL	Name	LYNCH, LESLIE
Address	815 NW 57 AVE SUITE 480	Address	815 NW 57 AVE SUITE 480
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	AMBR		
Name	JUNQUERA, ANGEL		
Address	815 NW 57 AVE SUITE 480		
City-State-Zip:	MIAMI FL 33126		

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: MANUEL MENENDEZ

MGR

02/14/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date