

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000225474

**Entity Name:** SLATE MIAMI GP, LLC

**Current Principal Place of Business:**

477 S ROSEMARY AVE STE 301  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

477 S ROSEMARY AVE STE 301  
WEST PALM BEACH, FL 33401

**FEI Number: 84-3070774**

**Certificate of Status Desired: No**

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

COGENCY GLOBAL, INC.  
115 N CALHOUN ST STE 4  
TALLAHASSEE, FL 32301 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  
Name           MILLER, KRISTIN  
Address        777 W PUTNAM AVE  
City-State-Zip: GREENWICH CT 06830

Title           MANAGER  
Name           FABBRI, WILLIAM  
Address        477 S ROSEMARY AVE  
                  STE 302  
City-State-Zip: WEST PALM BEACH FL 33401

Title           MANAGER  
Name           RICHMAN, RICHARD  
Address        777 W PUTNAM AVE  
City-State-Zip: GREENWICH CT 06830

*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: KRISTIN MILLER**

**AUTHORIZED  
REPRESENTATIVE**

**04/16/2020**

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

\_\_\_\_\_  
Date