

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000287810

Entity Name: 6450 COLLINS AVE #309 LLC

Current Principal Place of Business:

6450 COLLINS AVE
#309
MIAMI BEACH, FL 33141

Current Mailing Address:

14513 SW 96 TERRACE
MIAMI, FL 33186 US

FEI Number: 84-3930062

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHACON, ALIX
14513 SW 96 TERRACE
MIAMI, FL 33186 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	MGR
Name	CHACON, ALIX	Name	LOCKHART, ALIX
Address	14513 SW 96 TERRACE	Address	14513 SW 96 TERRACE
City-State-Zip:	MIAMI FL 33186	City-State-Zip:	MIAMI FL 33186

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: ALIX CHACON

TITLE MANAGER

04/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date