

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000296235

**Entity Name:** RAFAEL MEDINA LLC

**Current Principal Place of Business:**

1111 SUMMIT PLACE CIRCLE  
#D  
WEST PALM BEACH, FL 33415

**Current Mailing Address:**

1111 SUMMIT PLACE CIRCLE  
#D  
WEST PALM BEACH, FL 33415 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MEDINA, RAFAEL  
1111 SUMMIT PLACE CIR  
WEST PALM BEACH, FL 33415 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            PRES  
Name            MEDINA, RAFAEL  
Address        1111 SUMMIT PLACE CIR #D  
City-State-Zip: WEST PALM BEACH FL 33415

*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:** RAFAEL MEDINA

**MANAGER**

**04/29/2021**

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

\_\_\_\_\_  
Date