

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000138091

**Entity Name:** TCG ALLAPATTAH 14 FAMILY, LLC

**Current Principal Place of Business:**

1951 NW SOUTH RIVER DRIVE  
DEVELOPMENT OFFICE C/O IRIS ARIAS  
MIAMI, FL 33125

**Current Mailing Address:**

1951 NW SOUTH RIVER DRIVE  
DEVELOPMENT OFFICE C/O IRIS ARIAS  
MIAMI, FL 33125 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

CALDERON, LISSETTE  
1951 NW SOUTH RIVER DRIVE  
DEVELOPMENT OFFICE C/O IRIS ARIAS  
MIAMI, FL 33125 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            CALDERON, LISSETTE  
Address         1951 NW SOUTH RIVER DR.  
City-State-Zip: MIAMI FL 33125

*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:** LISSETTE CALDERON

**MANAGER**

**03/15/2023**

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

\_\_\_\_\_  
Date