

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M17000006900

**Entity Name:** KCP MANALAPAN, LLC

**Current Principal Place of Business:**

21500 BISCAYNE BLVD.  
SUITE 700  
AVENTURA, FL 33180

**Current Mailing Address:**

21500 BISCAYNE BLVD.  
SUITE 700  
AVENTURA, FL 33180 US

**FEI Number:** 30-0998733

**Certificate of Status Desired:** No

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

KAWA CAPITAL MANAGEMENT  
21500 BISCAYNE BLVD.  
SUITE 700  
AVENTURA, FL 33180 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	AUTHORIZED SIGNATORY
Name	ADES, DANIEL	Name	SAVERIN, ALEXANDRE
Address	21500 BISCAYNE BLVD.	Address	21500 BISCAYNE BLVD.
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
Title	AUTHORIZED SIGNATORY	Title	AUTHORIZED SIGNATORY
Name	BALDIM, CRISTINA	Name	LEMOS, CARLOS FELIPE
Address	21500 BISCAYNE BLVD.	Address	21500 BISCAYNE BLVD.
City-State-Zip:	AVENTURA FL 33180	City-State-Zip:	AVENTURA FL 33180
Title	AUTHORIZED SIGNATORY		
Name	TRASTER, JEREMY		
Address	21500 BISCAYNE BLVD.		
City-State-Zip:	AVENTURA FL 33180		

*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:** DANIEL ADES

**MNGR**

**03/21/2019**

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

\_\_\_\_\_  
Date