

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000139774

**Entity Name:** GENTHRUST XVII, LLC

**Current Principal Place of Business:**

11469 NW 34TH ST  
DORAL, FL 33178

**Current Mailing Address:**

11469 NW 34TH ST  
DORAL, FL 33178 US

**FEI Number:** 82-2065471

**Certificate of Status Desired:** No

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

MALAGON, JOSE  
11469 NW 34TH ST  
DORAL, FL 33178 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	AMBR	Title	MGRM
Name	MALAGON, JOSE	Name	GALLAGHER, SANDRA C
Address	11469 NW 34TH ST	Address	11238 NW 53RD LN
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

*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:** MALAGON, JOSE

AMBR

04/24/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date