

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000084038

**FILED**  
**Mar 21, 2012**  
**Secretary of State**

**Entity Name:** ALEXIS DEJORIA COLLECTIONS LLC

**Current Principal Place of Business:**

6001 PARK OF COMMERCE LLC  
BOCA RATON, FL 33487 US

**New Principal Place of Business:**

**Current Mailing Address:**

6001 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US

**New Mailing Address:**

**FEI Number:** 45-2806917

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

WOOLLEY, SCOTT  
6001 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 US

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

SHAFFER, BILL  
6001 PARK OF COMMERCE BLVD  
BOCA RATON, FL 33487 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:** BILL SHAFFER

03/21/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** WOOLLEY, SCOTT  
**Address:** 6001 PARK OF COMMERCE BLVD  
**City-St-Zip:** BOCA RATON, FL 33487 US

**Title:** MGR  
**Name:** DEJORIA, ALEXIS  
**Address:** 6001 PARK OF COMMERCE BLVD  
**City-St-Zip:** BOCA RATON, FL 33487 US

**Title:** MGR  
**Name:** SHAFFER, BILL  
**Address:** 6001 PARK OF COMMERCE BLVD  
**City-St-Zip:** BOCA RATON, FL 33487 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** BILL SHAFFER

MGR

03/21/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date