

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 18, 2003 8:00 am
Secretary of State

03-18-2003 90155 014 ****50.00

DOCUMENT # L02000032256

1. Entity Name
14278 BISCAYNE, L.L.C.



Principal Place of Business
C/O JOCKEY CLUB I
11111 BISCAYNE BLVD., STE 101
MIAMI, FL 33181

Mailing Address
C/O JOCKEY CLUB I
11111 BISCAYNE BLVD., STE 101
MIAMI, FL 33181

2. Principal Place of Business

3. Mailing Address
300 South Pointe Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Apt. 3103

City & State

City & State

Miami Beach, FL

Zip

Country

Zip

Country

33139

4. FEI Number
54-2086613

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ROBBINS, MARJORIE F
1090 KANE CONCOURSE, SUITE 202
BAY HARBOR ISLAND, FL 33154

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renewing)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME Jerrold Blair ☐ Delete
STREET ADDRESS 300 South Pointe Dr.
CITY-ST-ZIP Miami Beach, FL 33139 #3103

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: *Jerrold Blair*

Jerrold Blair

3/14/03

981-4466

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083 (10/02)