

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000032047

Entity Name: CM FLORIDA HOLDINGS, INC.**Current Principal Place of Business:**C/O CITY NATIONAL BANK, LEGAL DEPARTMENT
25 WEST FLAGLER STREET, 2ND FLOOR
MIAMI, FL 33130**Current Mailing Address:**C/O CITY NATIONAL BANK, LEGAL DEPARTMENT
25 WEST FLAGLER STREET, 2ND FLOOR
MIAMI, FL 33130 US**FEI Number:** 98-0595576**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**MARTIN, S. MARSHALL
C/O CITY NATIONAL BANK, LEGAL DEPARTMENT
25 WEST FLAGLER STREET, 2ND FLOOR
MIAMI, FL 33130 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:** S. MARSHALL MARTIN

01/16/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	DGM
Name	GONZALEZ, JORGE
Address	C/O CITY NATIONAL BANK, LEGAL DEPARTMENT 25 WEST FLAGLER STREET, 2ND FLOOR
City-State-Zip:	MIAMI FL 33130

Title	DGM
Name	NUNEZ FERNANDEZ, MANUEL
Address	C/O CITY NATIONAL BANK, LEGAL DEPARTMENT 25 WEST FLAGLER STREET, 2ND FLOOR
City-State-Zip:	MIAMI FL 33130

Title	DGM
Name	SANTA MARTA, PAULO
Address	C/O CITY NATIONAL BANK, LEGAL DEPARTMENT 25 WEST FLAGLER STREET, 2ND FLOOR
City-State-Zip:	MIAMI FL 33130

Title	S
Name	MARTIN, S. MARSHALL
Address	C/O CITY NATIONAL BANK, LEGAL DEPARTMENT 25 WEST FLAGLER STREET, 2ND FLOOR
City-State-Zip:	MIAMI FL 33130

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: S. MARSHALL MARTIN**SECRETARY**

01/16/2015

Electronic Signature of Signing Officer/Director Detail

Date