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: JAMES KEMPNER

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0000004085

Entity Name: 354 SOUTH BEACH ROAD, L.L.C.

### **Current Principal Place of Business:**

KENNETH F. KUNZMAN, ESQ., C/O CONNELL FOLEY LLP 85 LIVINGSTON AVE. ROSELAND, NJ 07068

## **Current Mailing Address:**

KENNETH F. KUNZMAN, ESQ., C/O CONNELL FOLEY LLP 85 LIVINGSTON AVE. ROSELAND, NJ 07068 US

# FEI Number: 22-3739365

# Name and Address of Current Registered Agent:

GAYLORD, MARC R ESQ. 11700 SE DIXIE HIGHWAY HOBE SOUND, FL 33455 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: MARC R GAYLORD

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

TitleMGRNameKEMPNER, JAMESAddress30 ROCKEFELLER PLAZA, 62 FLOORCity-State-Zip:NEW YORK NY 10020

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

MANAGER

04/23/2015

04/23/2015 Date

FILED Apr 23, 2015 Secretary of State CC5092885823

Certificate of Status Desired: No

Electronic Signature of Signing Authorized Person(s) Detail

Date