## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000005598 Entity Name: MILLANI, L.L.C.

**Current Principal Place of Business:** 

% JOHN G. ADMIRE 2555 PONCE DE LEON BLVD., SUITE 320 CORAL GABLES, FL 33134

## **Current Mailing Address:**

% JOHN G. ADMIRE 2555 PONCE DE LEON BLVD., SUITE 320 CORAL GABLES, FL 33134

FEI Number: 26-4585900 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

ADMIRE, JOHN G 2555 PONCE DE LEON BLVD. STE. 320 CORAL GABLES, FL 33134 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Feb 20, 2015

**Secretary of State** 

CC6820533002

Authorized Person(s) Detail:

Title Title **MGRM** 

HEATHCOTE, WAYNE Name Name SPRING, JENNIFER

MANOR FARM HOUSE -MANOR FARM HOUSE -Address Address NORTHMOOR, OXFORDSHIRE NORTHMOOR, OXFORDSHIRE

OX295BA City-State-Zip: OX295BA

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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.