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. 01/17/2014 SIGNATURE: LEONARD KATZ MGR

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

Electronic Signature of Signing Authorized Person(s) Detail

# FEI Number: 59-3725365

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

HOLLO, JEROME 100 S BISCAYNE BLVD 900 MIAMI, FL 33131 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:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

	· · · ·		
Title	MGR	Title	MGR
Name	HOLLO, JEROME	Name	HOLLO, WAYNE
Address	100 S BISCAYNE BLVD	Address	100 S BISCAYNE BLVD
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
Title	MGR	Title	MGR
Title Name	MGR KATZ, LEONARD	Title Name	Mgr Hollo, Tibor
Name	KATZ, LEONARD	Name	HOLLO, TIBOR

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L0100008957

Entity Name: TROPICANA REDEVELOPMENT, LLC

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

25 SECOND ST N SUITE 210 ST. PETERSBURG. FL 33701

# **Current Mailing Address:**

100 S BISCAYNE BLVD 900 MIAMI, FL 33131

Jan 17, 2014 Secretary of State CC9979033925

FILED

Certificate of Status Desired: No

Date