

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000413

Entity Name: 121 MAJORCA, LLC

Current Principal Place of Business:

121 MAJORCA AVE.
SUITE 300
CORAL GABLES, FL 33134

Current Mailing Address:

121 MAJORCA AVE.
SUITE 300
CORAL GABLES, FL 33134

FEI Number: 90-0073524

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORTON, ROBERT L
121 MAJORCA, SUITE 300
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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title P
Name NORTON, ROBERT L
Address 121 MAJORCA AVE
City-State-Zip: CORAL GABLES FL 33155

Title VP
Name NORTON, SUSAN
Address 121 MAJORCA AVE
City-State-Zip: CORAL GABLES FL 33155

Title VP
Name MATTIMORE, MICHAEL
Address 906 N. MONROE STREET
City-State-Zip: TALLAHASSEE FL 32303

Title VP
Name GOMEZ, RODOLFO
Address 121 MAJORCA AVE
City-State-Zip: CORAL GABLES FL 33155

Title VP
Name SAMPO, PETER L
Address 121 MAJORCA AVENUE
City-State-Zip: CORAL GABLES FL 33155

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.

SIGNATURE: ROBERT L. NORTON

PRESIDENT

01/06/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date