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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MGRM

## SIGNATURE: PETER TORRES

Electronic Signature of Signing Authorized Person(s) Detail

## 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000004510

Entity Name: ASTOR DEVELOPMENT HOLDINGS, LLC

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

C/O ASTOR DEVELOPMENT GROUP, LLC 2601 S. BAYSHORE DR., SUITE 1800 MIAMI, FL 33133

#### **Current Mailing Address:**

C/O ASTOR DEVELOPMENT GROUP, LLC 2601 S. BAYSHORE DR., SUITE 1800 MIAMI, FL 33133 US

## FEI Number: 06-1641766

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

TORRES, PETER A C/O ASTOR DEVELOPMENT GROUP, LLC 2601 S. BAYSHORE DR., SUITE 1800 MIAMI, FL 33133 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	MGRM
RA	Name	TORRES, HENRY MR.
RE DR., SUITE 1800	Address	2601 S. BAYSHORE DR., SUITE 1800
3	City-State-Zip:	MIAMI FL 33133
)	R A DRE DR., SUITE 1800 3	R A Name DRE DR., SUITE 1800 Address

# FILED Mar 12, 2013 Secretary of State CC8940388434

Certificate of Status Desired: No

03/12/2013 Date

Date