#### 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L02000015087

Entity Name: EMPIRE BUILDERS, LLC

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

333 LAS OLAS WAY SUITE CU-6 FORT LAUDERDALE, FL 33301

### **Current Mailing Address:**

333 LAS OLAS WAY SUITE CU-6 FORT LAUDERDALE, FL 33301 US

#### FEI Number: 36-4498850

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

LEVY, SANDY R 333 LAS OLAS WAY SUITE CU-6 FORT LAUDERDALE, FL 33301 US Certificate of Status Desired: No

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                         | Title           | MGRM                 |
| Name                          | KASLE, GAYLOR                | Name            | KASLE, BARBARA       |
| Address                       | 255 SE SPANISH TRAIL         | Address         | 255 SE SPANISH TRAIL |
| City-State-Zip:               | BOCA RATON FL 33432          | City-State-Zip: | BOCA RATON FL 33432  |
| Title                         | MGRM                         |                 |                      |
| Name                          | SANDY LEVY, ROTH IRA         |                 |                      |
| Address                       | 333 LAS OLAS WAY, SUITE CU-6 |                 |                      |
| City-State-Zip:               | FORT LAUDERDALE FL 33301     |                 |                      |

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: SANDY LEVY | MGM | 01/11/2018 |
|-----------------------|-----|------------|
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Electronic Signature of Signing Authorized Person(s) Detail

## FILED Jan 11, 2018 Secretary of State CC9846340733

Date