#### 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. SIGNATURE: TODD LEONI MANAGER

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L0300002221

Entity Name: LEOCAVLAUNDRY LLC

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

7100 BISCAYNE BLVD 206 MIAMI, FL 33138

### **Current Mailing Address:**

PO BOX 381703 MIAMI, FL 33238

# FEI Number: 92-0185280

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

LEONI, TODD 7100 BISCAYNE BLVD 206 MIAMI, FL 33138 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:

# Auth

Title	MGR	Title	MGRM
Name	LEONI, TODD	Name	CAVA, RICHARD
Address	7100 BISCAYNE BLVD #206	Address	1865 BRICKELL AVE
City-State-Zip:	MIAMI FL 33138	City-State-Zip:	MIAMI FL 33129

	Electronic Signature of Registered Agent			
horized Person(s) Detail :				
	MGR	Title	MGRM	
е	LEONI, TODD	Name	CAVA, RICHARD	
ess	7100 BISCAYNE BLVD #206	Address	1865 BRICKELL AVE	

Secretary of State CC7303847786

Certificate of Status Desired: No

01/15/2013

Date

# FILED Jan 15, 2013

Electronic Signature of Signing Authorized Person(s) Detail