

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L03000010672

**Entity Name:** MALOFI L.L.C.

**Current Principal Place of Business:**

ONE S.E. THIRD AVENUE  
STE. 2250  
MIAMI, FL 33131

**Current Mailing Address:**

ONE S.E. THIRD AVENUE  
STE. 2250  
MIAMI, FL 33131

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

AMKE REGISTERED AGENTS LLC  
2250 SUNTRUST INTERNATIONAL CENTER  
ONE S.E. THIRD AVENUE  
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

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BULLARD, WILLIAM  
Address 40 ISLAND DRIVE  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGRM  
Name SHARPLES, DAVID R  
Address 200 OCEAN LANE DRIVE, #1102  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGRM  
Name PRADO, FERNANDO  
Address 653 HAMPTON LANE  
City-State-Zip: KEY BISCAYNE FL 33149

*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:** WILLIAM BULLARD

MGR

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date