## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000064181

Entity Name: I.L.S.-MINN, LLC

**Current Principal Place of Business:** 

508 N. PARKWAY

GOLDEN BEACH, FL 33160

**Current Mailing Address:** 

508 N. PARKWAY

GOLDEN BEACH, FL 33160 US

**FEI Number: NOT APPLICABLE** Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEN-SHMUEL, LIOR 508 N. PARKWAY

GOLDEN BEACH, FL 33160 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: LIOR BEN-SHMUEL 02/28/2014

Electronic Signature of Registered Agent

Date

**FILED** Feb 28, 2014

**Secretary of State** 

CC5828389003

Authorized Person(s) Detail:

Title MGRM Title MGR

BEN-SHMUEL, IZAC Name BEN-SHMUEL, LIOR Name 101 S STATE ROAD 7, SUITE 201 Address 508 N. PARKWAY Address

City-State-Zip: GOLDEN BEACH FL 33160 HOLLYWOOD FL 33023 City-State-Zip:

Title MGR

Name BEN-SHMUEL, SHLOMI

Address 101 S STATE ROAD 7, SUITE 201

HOLLYWOOD FL 33023 City-State-Zip:

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: LIOR BEN-SHMUEL

02/28/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date