

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000017332

Entity Name: SUMMERHILL HOLDING, LLC**Current Principal Place of Business:**2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134**Current Mailing Address:**2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134**FEI Number:** 20-2380011**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CONSULTING SERVICES OF SOUTH FLORIDA, INC.
2121 PONCE DE LEON BLVD., SUITE 1050
CORAL GABLES, FL 33134 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	O'HARA CORPORATION
Address	2121 PONCE DE LEON BLVD., SUITE 1050
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	CALVO MASSY, ERNESTO
Address	2121 PONCE DE LEON BLVD. STE. 1050
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	VERGARA, MARIA L
Address	2121 PONCE DE LEON BLVD. STE. 1050
City-State-Zip:	CORAL GABLES FL 33134

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: CALVO MASSY , ERNESTO

MGRM

03/21/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date