

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000019944

**Entity Name:** CEDARS CAPITAL FUND, L.L.C.

**Current Principal Place of Business:**

8551 W. SUNRISE BLVD., #102A  
PLANTATION, FL 33322

**Current Mailing Address:**

8551 W. SUNRISE BLVD., #102A  
PLANTATION, FL 33322

**FEI Number:** 20-2532398

**Certificate of Status Desired:** No

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

AKAR, EMIL  
8551 W SUNRISE BLVD., #102A  
PLANTATION, FL 33322 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 MGR  
Name AKAR, EMIL  
Address 8551 W SUNRISE BLVD., #102 A  
City-State-Zip: PLANTATION FL 33322

*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:** EMIL A. AKAR

**PRESIDENT**

**04/15/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date