

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000026157

Entity Name: AMICI NURSERY, LLC

Current Principal Place of Business:

23600 SW 167 AVE
HOMESTEAD, 33031

Current Mailing Address:

6580 INDIAN CREEK DRIVE
APT. 603
MIAMI BEACH, FL 33140 US

FEI Number: 20-2520946

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIN, DENNIS J
13501 SW 128 STREET
108
MIAMI, FL 33186 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 AMICH, SIMON E
Address 5787 N BAY ROAD
City-State-Zip: MIAMI BEACH FL 33140

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: SIMON E. AMICH

MANAGER MEMBER

01/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date