## 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

FILED Jan 07, 2015

**Secretary of State** 

CC4547341697

## 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

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER MEMBER

01/07/2015