

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000042965

**Entity Name:** 4302-TRUMP II, LLC

**Current Principal Place of Business:**

15901 COLLINS AVE  
SUITE 4302  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

15901 COLLINS AVE  
SUITE 4302  
SUNNY ISLES, FL 33160 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LEITMAN, ARIE  
15901 COLLINS AVE  
SUITE 4302  
SUNNY ISLES, 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name BLINOVA, ALENA  
Address 15901 COLLINS AVE, SUITE 4302  
City-State-Zip: SUNNY ISLES FL 33160

Title MGR  
Name LEITMAN, ARIE  
Address 15901 COLLINS AVE, SUITE 4302  
City-State-Zip: SUNNY ISLES FL 33160

*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:** ARIE LEITMAN

**MGR**

**04/08/2014**

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

\_\_\_\_\_  
Date