

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000051405

**Entity Name:** SIECKEL, L.L.C.

**Current Principal Place of Business:**

540 BRICKELL KEY DRIVE  
APT. 1221  
MIAMI, FL 33131

**Current Mailing Address:**

PO BOX 310337  
MIAMI, FL 33231

**FEI Number:** 20-2838850

**Certificate of Status Desired:** No

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

DIAZ-SIECKEL, ADRIAN  
540 BRICKELL KEY DRIVE  
APT. 1221  
MIAMI, FL 33131 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 DIAZ-SIECKEL, ADRIAN  
Address 540 BRICKELL KEY DRIVE, APT. 1221  
City-State-Zip: MIAMI FL 33131

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:** ADRIAN DIAZ-SIECKEL

**MANAGING MEMBER**

**01/29/2014**

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

\_\_\_\_\_  
Date