

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000072848

**Entity Name:** AMAJUST, LLC

**Current Principal Place of Business:**

2799 NW BOCA RATON BLVD.  
SUITE 203  
BOCA RATON, FL 33431

**Current Mailing Address:**

400 RESERVOIR AVENUE  
SUITE 2A  
PROVIDENCE, RI 02907 US

**FEI Number:** 20-3171632

**Certificate of Status Desired:** Yes

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

SCIARRETTA, STEVEN A  
2799 NW BOCA RATON BLVD.  
SUITE 203  
BOCA RATON, FL 33431 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 MARDEROSIAN, GREGORY A  
Address 400 RESERVOIR AVENUE, SUITE 2A  
City-State-Zip: PROVIDENCE RI 02907

*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:** GREGORY A. MARDEROSIAN

**MANAGER**

**01/06/2015**

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

\_\_\_\_\_  
Date