

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000119499

**Entity Name:** SH 604-605 LLC

**Current Principal Place of Business:**

479 NE 30TH STREET  
#903  
MIAMI, FL 33137

**Current Mailing Address:**

479 NE 30TH STREET  
#903  
MIAMI, FL 33137

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FORSHEE & LOCKWOOD, P.A.  
220 MIRACLE MILE  
SUITE 221  
CORAL GABLES, FL 33134 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 PORTER, EDWARD  
Address 4736 NORTH BAY ROAD  
City-State-Zip: MIAMI 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:** EDWARD PORTER

MGR

04/29/2015

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

\_\_\_\_\_  
Date