

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000119848

**Entity Name:** HATOOOLIM LLC

**Current Principal Place of Business:**

21218 ST. ANDREWS BLVD.  
#404  
BOCA RATON, FL 33433

**Current Mailing Address:**

21218 ST. ANDREWS BLVD.  
#404  
BOCA RATON, FL 33433 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

KATZ, THOMAS O  
2255 GLADES ROAD  
SUITE 240W  
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            KATZ, THOMAS O  
Address        2255 GLADES RD, SUITE 240W  
City-State-Zip: BOCA RATON FL 33431

Title            MGR  
Name            KATZ, DANIEL W  
Address        12914 STONEBROOK DRIVE  
City-State-Zip: DAVIE FL 33330

*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:** THOMAS O. KATZ

**MANAGER**

**01/09/2015**

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

\_\_\_\_\_  
Date