

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000000863

**Entity Name:** SOUTHMARYL LLC

**Current Principal Place of Business:**

951 BRICKELL AVE  
UNIT 3510  
MIAMI, FL 33131

**Current Mailing Address:**

951 BRICKELL AVE  
UNIT 3510  
MIAMI, FL 33131

**FEI Number:** 33-1197171

**Certificate of Status Desired:** No

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

GALVIS, JEHISON J  
4972 SW 164 AVENUE  
MIRAMAR, FL 33027-4947 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           | P                           | Title           | VP                        |
| Name            | GALVIS, HIDELBRANDO         | Name            | GELVEZ, NUBIA E           |
| Address         | 951BRICKELL AVE - UNIT 3510 | Address         | 951 BRICKEL AVE UNIT 3510 |
| City-State-Zip: | MIAMI FL 33131              | 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:** GALVIS HIDELBRANDO

P

02/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date