## **2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000061529

Entity Name: 180 NE 6TH AVENUE LLC

Current Principal Place of Business:

180 NE 6TH AVE # A
DELRAY BEACH. FL 33483

Current Mailing Address:

2647 FRANCES ST BELLMORE, NY 11710

FEI Number: 26-2815534 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

7912 SANOMA 204 LLC 7912 SONOMA SPRINGS CIR STE 204 BOYNTON BEACH, FL 33463 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: BRIAN F CALIFANO 04/27/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

NameCALIFANO, BRIAN FNameFAIELLA, LOUIS IIIAddress2647 FRANCES STAddress296 BAYVIEW AVE

City-State-Zip: BELLMORE NY 11710 City-State-Zip: MASSAPEQUA NY 11758

Title MGR Title MGR

NameFAIELLA, LOUIS SNameKAPLAN, MARCAddress3086 SUSAN RDAddress2956 WILSON AVE

City-State-Zip: BELLMORE NY 11710 City-State-Zip: WANTAGH NY 11793

Title MGR Title MGR

Name KAPLAN, RUSSELL Name SAMPINO, ANTHONY

Address 3136 LYDIA LN Address 55 WEST LN

City-State-Zip: BELLMORE NY 11710 City-State-Zip: BAYSHORE NY 11706

Title MANAGER

Name VULLO, JOHN DR.

Address 35 GARNER LANE

City-State-Zip: BAY SHORE NY 11706

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: BRIAN F CALIFANO

Electronic Signature of Signing Authorized Person(s) Detail

MANAGING PARTNER

04/27/2016

Date

FILED Apr 27, 2016

**Secretary of State** 

CR6827747965