

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000117123

**Entity Name:** SMA AT NINTH, LLC**Current Principal Place of Business:**2200 BISCAYNE BLVD.  
MIAMI, FL 33137**Current Mailing Address:**2200 BISCAYNE BLVD.  
MIAMI, FL 33137**FEI Number:** 26-3934396**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHEITELMAN, MICHAEL ESQ.  
2200 BISCAYNE BLVD.  
MIAMI, FL 33137 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:** MICHAEL SHEITELMAN

04/22/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	SK BUSINESS TRUST	Name	RF BUSINESS TRUST
Address	2200 BISCAYNE BLVD.	Address	2200 BISCAYNE BLVD.
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137
Title	P	Title	T
Name	DUCHMAN, BRIAN	Name	DE ALMAGRO, PABLO
Address	2200 BISCAYNE BLVD.	Address	2200 BISCAYNE BLVD.
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137
Title	S	Title	VP
Name	DACHOH, SHLOMO	Name	SHEITELMAN, MICHAEL
Address	2200 BISCAYNE BLVD.	Address	2200 BISCAYNE BLVD.
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137

*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:** RUSSELL GALBUT

MANAGER

04/22/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date