

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000049166

**Entity Name:** ROOFLIFTERS USA, LLC

**Current Principal Place of Business:**

2525 PONCE DE LEON BLVD  
300  
MIAMI, FL 33134

**FILED**  
**Apr 21, 2014**  
**Secretary of State**  
**CC4507592731**

**Current Mailing Address:**

2525 PONCE DE LEON BLVD  
300  
MIAMI, FL 33134

**FEI Number: 27-0227504**

**Certificate of Status Desired: No**

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

HARRIS, MASON  
2525 PONCE DE LEON BLVD  
300  
MIAMI, 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 MGRM  
Name HARRIS, MASON  
Address 2525 PONCE DE LEON BLVD, 300  
City-State-Zip: MIAMI FL 33134

Title MGRM  
Name SHIFF, MARTY  
Address 2525 PONCE DE LEON BLVD, 300  
City-State-Zip: MIAMI FL 33134

*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: MASON HARRIS**

**VP OPERATIONS**

**04/21/2014**

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

\_\_\_\_\_  
Date