

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000081094

**Entity Name:** MAR-GUR 36 LLC

**Current Principal Place of Business:**

1869-75 NE 163 STREET  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

P O BOX 403726  
MIAMI BEACH, FL 33140

**FEI Number:** 27-0849400

**Certificate of Status Desired:** No

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

GURFINKEL, ROSE  
4620 PINE TREE DRIVE  
MIAMI BEACH, FL 33140 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 GURFINKEL, ROSE  
Address 4620 PINE TREE DRIVE  
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM  
Name GURFINKEL, SAM  
Address 4620 PINE TREE DR.  
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM  
Name MARMOR, STUART  
Address 10205 COLLINS AVENUE  
City-State-Zip: BAL HARBOUR FL 33154

*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:** SAM GURFINKEL

MGRM

06/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date