that my name appears above, or on an attachment with all other like empowered. SIGNATURE: SERGIO ROK MANAGER

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 608, Florida Statutes; and

Electronic Signature of Signing Authorized Person(s) Detail

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000091154

Entity Name: NEW ORLEANS BOTANICA, LLC

Current Principal Place of Business:

48 EAST FLAGLER STREET PH-105 MIAMI, FL 33131

Current Mailing Address:

48 EAST FLAGLER STREET PH-105 MIAMI, FL 33131 US

FEI Number: 27-0970371

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

MOSKOVITZ, DANIEL S 48 EAST FLAGLER STREET PH-104 MIAMI, FL 33131 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:

	Authorized Person(s) Detail :				
	Title	MGR	Title	MGR	
	Name	ROK, SERGIO	Name	MOSKOVITZ, ROBERT S	
	Address	48 EAST FLAGLER STREET, PH-105	Address	48 EAST FLAGLER STREET, PH-105	
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	

Certificate of Status Desired: No

MANAGER

01/25/2013

Date

FILED Jan 25, 2013 Secretary of State CC1333425702

Date