

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000008974

**Entity Name:** 417 S. L STREET, LLC

**Current Principal Place of Business:**

417 S. L STREET  
LAKE WORTH, FL 33460

**Current Mailing Address:**

807 SUMMER ST  
UNIT 5  
MANCHESTER, MA 01944 US

**FEI Number:** 27-1741708

**Certificate of Status Desired:** No

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

ZIKAKIS, SALOME  
307 SE 14TH STREET  
FORT LAUDERDALE, FL 33316 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 KOPPEL, DALE  
Address 807 SUMMER ST  
UNIT 5  
City-State-Zip: MANCHESTER MA 01944

*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:** DALE KOPPEL

MGRM

04/25/2014

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

\_\_\_\_\_ Date