

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000023544

**Entity Name:** MAISON DELUXE 111, LLC

**Current Principal Place of Business:**

C/O 112 PERCENT PURE LLC  
429 LENOX AV #5C17  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O STORMSTONE LLC  
PO BOX 191524  
MIAMI BEACH, FL 33119

**FEI Number:** 35-2377844

**Certificate of Status Desired:** No

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

BARTHE, FREDERIC MICHEL  
ONE EAST BROWARD BOULEVARD  
SUITE 700  
FORT LAUDERDALE, FL 33301 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:** FREDERIC MICHEL BARTHE

04/28/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name STORMSTONE, LLC  
Address PO BOX 191524  
City-State-Zip: MIAMI BEACH FL 33119

*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:** JEAN CHRISTOPHE DEROMEDI DELPLANQUE

OWNER

04/28/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date