

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000031347

**FILED**  
**Apr 09, 2014**  
**Secretary of State**  
**CC6764541835**

**Entity Name:** HERSKOWITZ INVESTMENT GROUP LLC

**Current Principal Place of Business:**

8820 SW 105 STREET  
MIAMI, FL 33176

**Current Mailing Address:**

8820 SW 105 STREET  
MIAMI, FL 33176

**FEI Number:** 27-2172391

**Certificate of Status Desired:** No

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

HERSKOWITZ, GREG M  
9100 S. DADELAND BLVD  
SUITE 908  
MIAMI, FL 33156 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	Title	MGRM
Name	HERSKOWITZ, MARILYN	Name	HERSKOWITZ, GREG M
Address	8820 SW 105 STREET	Address	6745 SW 139 STREET
City-State-Zip:	MIAMI FL 33176	City-State-Zip:	MIAMI FL 33158
Title	MGRM	Title	MANAGING MEMBER
Name	MILLER, KIM	Name	HERSKOWITZ, BRAD J
Address	7070 SW 108 TERRACE	Address	8820 SW 105 STREET
City-State-Zip:	PINECREST FL 33156	City-State-Zip:	MIAMI FL 33176

*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:** GREG HERSKOWITZ

**MGRM**

**04/09/2014**

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

\_\_\_\_\_  
Date