

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000035831

**Entity Name:** TIP TOP SHOE SAVER LLC

**Current Principal Place of Business:**

3030 NE 188 TH STREET  
#502  
AVENTURA, FL 33180

**Current Mailing Address:**

3030 NE 188 TH STREET  
#502  
AVENTURA, FL 33180 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

LYLES, KELLY A  
3030 NE 188 TH STREET  
#502  
AVENTURA, FL 33180 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            CEO  
Name            LYLES, KELLY  
Address        3030 NE 188TH STREET  
                  502  
City-State-Zip: AVENTURA FL 33180

Title            VP  
Name            DIB, SYED F  
Address        4005 9TH  
City-State-Zip: BROOKLYN NY 11232

*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:** KELLY LYLES

CEO

04/29/2014

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

\_\_\_\_\_  
Date