

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000037279

**Entity Name:** CASUARINA LLC

**Current Principal Place of Business:**

MIAMI CENTER - SUITE 800  
201 S. BISCAYNE BLVD.  
MIAMI, FL 33131

**Current Mailing Address:**

MIAMI CENTER - SUITE 800  
201 S. BISCAYNE BLVD.  
MIAMI, FL 33131 US

**FEI Number:** 27-2295023

**Certificate of Status Desired:** No

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

HARPER, GEORGE R  
MIAMI CENTER - SUITE 800  
201 S. BISCAYNE BLVD.  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name VERA, JACQUES  
Address C/O 201 S. BISCAYNE BLVD. - SUITE  
800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name VERA, MARIA DE LOURDES  
Address C/O 201 S. BISCAYNE BLVD. - SUITE  
800  
City-State-Zip: MIAMI FL 33131

*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:** JACQUES VERA

**MANAGER**

**04/21/2015**

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

\_\_\_\_\_  
Date