

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000051460

**Entity Name:** 209 LAKEWORTH , LLC.

**Current Principal Place of Business:**

209 NORTH DIXIE HWY  
LAKE WORTH, FL 33460

**FILED**  
**Jan 09, 2015**  
**Secretary of State**  
**CC8963551575**

**Current Mailing Address:**

1881 WASHINGTON AVENUE  
#16F  
MIAMI BEACH, FL 33139

**FEI Number:** 27-2560003

**Certificate of Status Desired:** No

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

TIBI, ARNAUD B  
1881 WASHINGTON AVE  
16F  
MIAMI BEACH, FL 33139 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	TIBI, ARNAUD B	Name	SARKISSIAN, JEAN-JACQUES G
Address	1881 WASHINGTON AVENUE #16F	Address	1881 WASHINGTON AVENUE #16F
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

*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:** ARNAUD TIBI

**MANAGING MEMBER**

**01/09/2015**

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

\_\_\_\_\_  
Date