# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000058805

Entity Name: MORPHEAN, LLC

#### **Current Principal Place of Business:**

2875 NE 191 STREET SUITE 801 AVENTURA, FL 33180

# **Current Mailing Address:**

2875 NE 191 STREET SUITE 801 AVENTURA, FL 33180 US

# FEI Number: 42-1771905

# Name and Address of Current Registered Agent:

INSAUSTI, MARIA M 2875 NE 191 STREET SUITE 801 AVENTURA, FL 33331 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

#### Authorized Person(s) Detail :

Title	MGR
Name	INSAUSTI, MARIA M
Address	2875 NE 191 STREET SUITE 801
City-State-Zip:	AVENTURA FL 33180

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: MARIA M INSAUSTI

MGR

04/27/2015 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 27, 2015 Secretary of State CC6552062179

Certificate of Status Desired: No

Date