

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000085219

**Entity Name:** SULLIVAN'S OF MIAMI, LLC

**Current Principal Place of Business:**

930 S. KIMBALL  
SUITE 100  
SOUTHLAKE, TX 76092

**Current Mailing Address:**

930 S. KIMBALL  
SUITE 100  
SOUTHLAKE, TX 76092 US

**FEI Number:** 27-3295799

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	PMGR	Title	S
Name	MEDNANSKY, MARK S	Name	MARTENS III, WILLIAM S
Address	930 S. KIMBALL, S. 100	Address	930 S. KIMBALL
City-State-Zip:	SOUTHLAKE TX 76092	City-State-Zip:	SOUTHLAKE TX 76092
Title	T		
Name	PENNISON JR., THOMAS J		
Address	930 S. KIMBALL		
City-State-Zip:	SOUTHLAKE TX 76092		

*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:** MARK S MEDNANSKY

**PRESIDENT**

**03/25/2014**

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

\_\_\_\_\_  
Date