# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000093054

Entity Name: JAMES FERRI ASSOCIATES LLC

# **Current Principal Place of Business:**

2401 ANDERSON ROAD APT 15

CORAL GABLES, FL 33134

# **Current Mailing Address:**

2401 ANDERSON ROAD APT 15 CORAL GABLES, FL 33134 US

FEI Number: 27-3416034 Certificate of Status Desired: No

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

FERRI, JAMES 2401 ANDERSON ROAD APT 15 CORAL GABLES, FL 33134 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

**FILED** Apr 25, 2016

**Secretary of State** 

CC2708543583

### Authorized Person(s) Detail:

Title **MGRM** 

FERRI, JAMES Name

2401 ANDERSON ROAD Address

APT 15

City-State-Zip: CORAL GABLES FL 33134

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.

04/25/2016 SIGNATURE: JAMES FERRI **MGRM**