# that my name appears above, or on an attachment with all other like empowered. SIGNATURE: MARTIN PINILLA MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000124788

Entity Name: FLAGLER STREET PARTNERS, LLC

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

1637 SW 8 STREET 200 MIAMI, FL 33135

#### **Current Mailing Address:**

1637 SW 8 STREET 200 MIAMI, FL 33135

### FEI Number: 27-4154378

### Name and Address of Current Registered Agent:

PINILLA, MARTIN A II 1637 SW 8 STREET 200 MIAMI, FL 33135 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	: MARTIN PINILLA			04/30/2014
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	MANAGER	
Name	BARLINGTON GROUP, LLC	Name	URBAN ATLANTIC GROUP, LLC	)
Address	1637 SW 8 STREET, STE 200	Address	950 BRICKELL BAY DRIVE #800	)
City-State-Zip:	MIAMI FL 33135	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

FILED Apr 30, 2014 Secretary of State CC2000746176

Certificate of Status Desired: No

04/30/2014 Date