

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000131619

**Entity Name:** NACHES, LLC

**Current Principal Place of Business:**

SYLVAN SCHEFLER  
1009 PARK AVENUE  
NEW YORK, NY 10028

**FILED**  
**Apr 18, 2014**  
**Secretary of State**  
**CC2461510222**

**Current Mailing Address:**

C/O SYLVAN SCHEFLER  
1009 PARK AVENUE  
NEW YORK, NY 10028 US

**FEI Number:** 27-4410873

**Certificate of Status Desired:** No

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

ENGELBERG, MORRIS ESQ.  
4040 SHERIDAN STREET  
HOLLYWOOD, FL 33021 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  
Name SCHEFLER, SYLVAN  
Address 1009 PARK AVENUE  
City-State-Zip: NEW YORK NY 10028

*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:** SYLVAN SCHEFLER

MGRM

04/18/2014

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

\_\_\_\_\_  
Date