

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000016574

Entity Name: G-MA MANAGEMENT LLC**Current Principal Place of Business:**2665 SOUTH BAYSHORE DRIVE, SUITE 901
COCONUT GROVE, FL 33133**Current Mailing Address:**2665 SOUTH BAYSHORE DRIVE, SUITE 901
COCONUT GROVE, FL 33133**FEI Number:** 27-4842720**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LOGAN, BARRY S
2665 SOUTH BAYSHORE DRIVE, SUITE 901
COCONUT GROVE, FL 33133 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	MGR
Name	NAHMAD, ALBERT H
Address	2665 SOUTH BAYSHORE DRIVE, SUITE 901
City-State-Zip:	COCONUT GROVE FL 33133

Title	MANAGER
Name	CUSTER, MICHAEL
Address	2665 SOUTH BAYSHORE DRIVE, SUITE 901
City-State-Zip:	COCONUT GROVE FL 33133

Title	MANAGER
Name	NAHMAD, AARON J
Address	2665 S BAYSHORE DRIVE 901
City-State-Zip:	MIAMI FL 33133

Title	MANAGER
Name	SCHIMEL, VALERIE F
Address	2665 S BAYSHORE DRIVE #901
City-State-Zip:	MIAMI FL 33133

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: AARON NAHMAD

MANAGER

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date