#### 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. MM

SIGNATURE: GENARO DIAZ

Electronic Signature of Signing Authorized Person(s) Detail

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

04/10/2014

# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L11000058895

Entity Name: SOUTH FLORIDA MULTI HOME FUND, LLC

# **Current Principal Place of Business:**

2600 S DOUGLAS RD SUITE 610 MIAMI, FL 33134

# **Current Mailing Address:**

2600 S DOUGLAS RD 610 MIAMI, FL 33134 US

# FEI Number: 33-1221038

## Name and Address of Current Registered Agent:

ALVARO CASTILLO B., P.A. 1390 BRICKELL AVENUE SUITE 200 MIAMI, FL 33131 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

# Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	DIAZ, GENARO	Name	CONESA, RODRIGO
Address	2730 SW 3RD AVE STE 700	Address	1390 BRICKELL AVENUE, SUTIE 200
City-State-Zip:	MIAMI FL 33129	City-State-Zip:	MIAMI FL 33131

FILED Apr 10, 2014 Secretary of State CC9714591393

Certificate of Status Desired: No

Date