

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000074477

**Entity Name:** SUNNY 603, LLC

**Current Principal Place of Business:**

175 SW 7 STREET  
SUITE 1511-1512  
MIAMI, FL 33130

**FILED**  
**Apr 24, 2015**  
**Secretary of State**  
**CC2281610576**

**Current Mailing Address:**

175 SW 7 STREET  
SUITE 1511-1512  
MIAMI, FL 33130 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

HERNANDEZ, VICTOR  
175 SW 7 STREET  
SUITE 1511-1512  
MIAMI, FL 33130 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 HERNANDEZ, VICTOR  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name HERNANDEZ, HUGO  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name ANZOLA DE HERNANDEZ, CONCHITA  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name HERNANDEZ, HUGO  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name HERNANDEZ, MARIA  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

Title MGRM  
Name DE HERNANDEZ, TRINA R  
Address 175 SW 7 STREET  
SUITE 1511-1512  
City-State-Zip: MIAMI FL 33130

*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:** VICTOR HERNANDEZ

**MGRM**

**04/24/2015**

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

\_\_\_\_\_  
Date