

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000084631

Entity Name: MANTON 1, LLC

Current Principal Place of Business:

490 SAWGRASS CORP PKWY, SUITE 310
SUNRISE, FL 33325

Current Mailing Address:

490 SAWGRASS CORP PKWY, SUITE 310
SUNRISE, FL 33325

FEI Number: 45-2828827

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GUTTA, FRANK
490 SAWGRASS CORP PKWY, SUITE 310
SUNRISE, FL 33325 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 GUTTA, FRANK
Address 490 SAWGRASS CORP PKWY, SUITE 310
City-State-Zip: SUNRISE FL 33325

Title MANAGING MEMBER
Name MEHTA, HARISH
Address 301 W 53RD STREET APT 15F
City-State-Zip: NEW YORK NY 10019

Title MANGING MEMBER
Name MEHTA, KEVAL H
Address 301 W 53RD STREET APT 15F
City-State-Zip: NEW YORK NY 10019

Title MGRM
Name MEHTA, MISHAAN
Address 301 W. 53RD ST., APT. 15 F
City-State-Zip: NEW YORK NY 10019

Title MANGING MEMBER
Name MEHTA, MEENA J
Address 301 W 53RD STREET APT 15F
City-State-Zip: NEW YORK NY 10019

Title MANGING MEMBER
Name MEHTA, KUNAAL H
Address 301 W 53RD STREET APT 15F
City-State-Zip: NEW YORK NY 10019

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: MISHAAN MEHTA

MEMBER

02/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date