

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000109683

**Entity Name:** 5395 S. UNIVERSITY DRIVE, LLC

**Current Principal Place of Business:**

10500 NW 12TH STREET  
DORAL, FL 33172

**Current Mailing Address:**

10500 NW 12TH STREET  
DORAL, FL 33172 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BERTRAN, VANESSA . ESQ.  
250 CATALONIA AVE  
SUITE 304  
CORAL GABLES, FL 33146 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:** VANESSA BERTRAN

04/30/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name SEIDLE, MICHAEL  
Address 10500 NW 12TH STREET  
City-State-Zip: DORAL FL 33172

*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:** MICHAEL SEIDLE

MGR

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date