

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000128632

**Entity Name:** 2 RAMIREZ, LLC

**Current Principal Place of Business:**

770 LAVENDER CIR  
WESTON, FL 33327

**Current Mailing Address:**

770 LAVENDER CIR  
WESTON, FL 33327

**FEI Number:** 45-3376260

**Certificate of Status Desired:** No

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

RAMIREZ, FRANK  
770 LAVENDER CIR  
WESTON, FL 33327 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	Title	MGRM
Name	RAMIREZ, FRANK	Name	RAMIREZ, LESLIE
Address	770 LAVENDER CIR	Address	770 LAVENDER CIR
City-State-Zip:	WESTON FL 33327	City-State-Zip:	WESTON FL 33327

*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:** FRANK RAMIREZ

**MGRM**

**02/25/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date