

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000140939

Entity Name: ASSETS RECOVERY 25, LLC

Current Principal Place of Business:

2100 PONCE DE LEON BLVD, SUITE 720
CORAL GABLES, FL 33134

Current Mailing Address:

2100 PONCE DE LEON BLVD, SUITE 720
CORAL GABLES, FL 33134 US

FEI Number: 45-4058737

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ASSETS RECOVERY 23, LLC
2100 PONCE DE LEON BLVD, SUITE 720
CORAL GABLES, FL 33134 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 ASSETS RECOVERY 23, LLC
Address 2100 PONCE DE LEON BLVD, SUITE
720
City-State-Zip: CORAL GABLES FL 33134

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: JAMES FRATANGELO

MGR

01/14/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date