

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000141196

Entity Name: OLDIELOX, LLC

Current Principal Place of Business:

4845 HAMMOCK LAKE DRIVE
CORAL GABLES, FL 33156

Current Mailing Address:

4845 HAMMOCK LAKE DRIVE
CORAL GABLES, FL 33156

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPCO, INC.
2699 SOUTH BAYSHORE DRIVE, 7TH FLOOR
MIAMI, FL 33133-5408 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 WHITMAN, RANDALL
Address 4845 HAMMOCK LAKE DRIVE
City-State-Zip: CORAL GABLES FL 33156

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: RANDALL WHITMAN

MGR

04/12/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date