

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000144564

**Entity Name:** FAITHLAND AVENTURA LLC

**Current Principal Place of Business:**

2627 NE 203RD ST, STE. 202  
AVENTURA, FL 33180

**Current Mailing Address:**

2627 NE 203RD ST, STE. 202  
AVENTURA, FL 33180

**FEI Number:** 90-0781565

**Certificate of Status Desired:** No

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

FAITH, KEVIN  
2627 NE 203RD ST, STE. 202  
AVENTURA, FL 33180 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           MANAGER  
Name           FAITH, KEVIN  
Address        2627 NE 203RD STREET  
                  SUITE 202  
City-State-Zip: AVENTURA FL 33180

*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:** KEVIN FAITH

MANAGER

04/25/2016

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date