

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000043969

**Entity Name:** 493 HOLIDAY, LLC

**Current Principal Place of Business:**

20201 E. COUNTRY CLUB DRIVE., UNIT 1601  
AVENTURA, FL 33180

**Current Mailing Address:**

20201 E. COUNTRY CLUB DRIVE., UNIT 1601  
AVENTURA, FL 33180 US

**FEI Number:** 46-2148388

**Certificate of Status Desired:** No

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

FISHMAN, GREGORY R  
2750 NE 185 ST., STE. 302  
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	MGRM	Title	MGRM
Name	PERLMAN, ALBERTO	Name	PERLMAN, STEPHANIE
Address	20201 E. COUNTRY CLUB DRIVE., UNIT 1601	Address	20201 E. COUNTRY CLUB DRIVE., UNIT 1601
City-State-Zip:	AVENTURA FL 33180	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:** ALBERTO PERLMAN

MGRM

02/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date