#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000103009

**Entity Name: FIVE CLOVERS LLC** 

# **Current Principal Place of Business:**

4700 SHERIDAN STREET STE J

HOLLYWOOD, FL 33021

4700 SHERIDAN STREET

## **Current Mailing Address:**

4700 SHERIDAN STREET STE J HOLLYWOOD, FL 33021 US

FEI Number: 33-1225443 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

TAX, ACCOUNTING & FINANCIAL EXPERTS INC 20900 NE 30TH AVE STE 817 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

FILED Mar 19, 2015

**Secretary of State** 

CC5276384411

### Authorized Person(s) Detail:

Title MGF

Name HOBERMAN, PABLO

Address 4700 SHERIDAN STREET STE J

City-State-Zip: HOLLYWOOD FL 33021

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.

03/19/2015