2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000104059

Entity Name: BISCAYA HOLDINGS 5, LLC

Current Principal Place of Business:

444 BRICKELL AVENUE SUITE 417 MIAMI, FL 33131

Current Mailing Address:

444 BRICKELL AVENUE SUITE 417 MIAMI, FL 33131 US

FEI Number: 46-2044290

Name and Address of Current Registered Agent:

CHARLES RATNER, P.A. 200 S BISCAYNE BLVD SUITE 3200 MIAMI, FL 33131 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

Authorized Person(s) Detail :

| Authonized Ferson(s) Detail. | | | |
|------------------------------|----------------------------------|-----------------|------------------------------|
| Title | MGR | Title | MGR |
| Name | CAMPOSANO, PABLO A | Name | KAISER, ODED M |
| Address | 444 BRICKELL AVENUE, STE 417 | Address | 444 BRICKELL AVENUE, STE 417 |
| City-State-Zip: | MIAMI FL 33131 | City-State-Zip: | MIAMI FL 33131 |
| Title | MANAGER | | |
| Name | OMK PA 401K TRUST | | |
| Address | 444 BRICKELL AVENUE SUITE 417 | | |
| City-State-Zip: | MIAMI FL 33131 | | |

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: ODED KAISER

MANAGER

04/16/2015

Date

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date