

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000139790

**Entity Name:** 339-41 MIRACLE MILE LLC

**Current Principal Place of Business:**

2005 VISTA PARKWAY  
SUITE 210  
WEST PALM BEACH, FL 33411

**Current Mailing Address:**

PO BOX 1999  
JUPITER, FL 33469-1999 US

**FEI Number:** 46-2126632

**Certificate of Status Desired:** No

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

DERREVERE STEVENS BLACK & COZAD  
2005 VISTA PARKWAY  
SUITE 210  
WEST PALM BEACH, FL 33411 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 JSS FAMILY TRUST  
Address PO BOX 1999  
City-State-Zip: JUPITER FL 33469-1999

*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:** MICHAEL B. STEVENS

**ATTORNEY**

**04/28/2017**

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

\_\_\_\_\_  
Date