

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000140445

Entity Name: ZERO NINE LLC

Current Principal Place of Business:

55 MERRICK WAY
UNIT #402
CORAL GABLES, FL 33134

Current Mailing Address:

55 MERRICK WAY
UNIT #402
CORAL GABLES, FL 33134 US

FEI Number: 46-1352294

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BARBARA, RICHARD L
2701 SOUTH BAYSHORE DRIVE
SUITE 500
MIAMI, FL 33133 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 CAPO, ALEJANDRO
Address 55 MERRICK WAY
UNIT #402
City-State-Zip: CORAL GABLES FL 33134

Title MGRM
Name BUSTAMANTE, ROBERT J
Address 55 MERRICK WAY
UNIT #402
City-State-Zip: CORAL GABLES FL 33134

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: ALEJANDRO CAPO

OWNER

01/09/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date