

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000150846

**Entity Name:** 400 SUNNY ISLES #1819, LLC

**Current Principal Place of Business:**

17600 COLLINS AVE  
SUNNY ISLES BEACH, FL, FL 33160

**Current Mailing Address:**

17600 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

PADRON, JM SR.  
17600 COLLINS AVE  
SUNNY ISLES BEACH, FL 33160 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            PADRON, JOSE MJR.  
Address        17600 COLLINS AVE  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** JOSE PADRON

MGRM

04/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date