# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000156384

Entity Name: 18356 NW, LLC

# **Current Principal Place of Business:**

1600 PONCE DE LEON BLVD, 10TH FLOOR SUITE 1018 CORAL GABLES, FL 33134

# **Current Mailing Address:**

1600 PONCE DE LEON BLVD, 10TH FLOOR SUITE 1018 CORAL GABLES, FL 33134 US

## FEI Number: 99-0383686

### Name and Address of Current Registered Agent:

CMS INTERNATIONAL ENTERPRISES, INC 550 BILTMORE WAY 200 CORAL GABLES, FL 33134 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 :

TitleMGRNamePEGASUS ADVISORY SERVICESAddressMAIN STREET, HUNKINS PLAZA<br/>SUITE 556City-State-Zip:CHARLESTOWN

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.

MANAGER

### SIGNATURE: PEGASUS ADVISORY SERVICES

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

02/27/2015 Date