

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000001311

**Entity Name:** TOM SCICLUNA LLC

**Current Principal Place of Business:**

1635 SW 18TH AVENUE  
MIAMI, FL 33145

**Current Mailing Address:**

1635 SW 18TH AVENUE  
MIAMI, FL 33145 US

**FEI Number:** 30-0759566

**Certificate of Status Desired:** Yes

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

SCICLUNA, THOMAS  
1635 SW 18TH AVENUE  
MIAMI, FL 33145 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 SCICLUNA, THOMAS MR  
Address 1635 SW 18TH AVENUE  
City-State-Zip: MIAMI FL 33145

*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:** THOMAS SCICLUNA

MGRM

03/19/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date