

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000036256

**Entity Name:** CCLS 011236 LLC

**Current Principal Place of Business:**

2665 SOUTH BAYSHORE DRIVE, STE. 800  
COCONUT GROVE, FL 33133

**Current Mailing Address:**

2665 SOUTH BAYSHORE DRIVE, STE. 800  
COCONUT GROVE, FL 33133

**FEI Number:** 30-0779983

**Certificate of Status Desired:** No

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

GURIAN, JORGE L  
2665 SOUTH BAYSHORE DRIVE, STE. 800  
COCONUT GROVE, 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 LOBO LANDA, CRISTINA  
Address 2665 SOUTH BAYSHORE DRIVE, STE.  
800  
City-State-Zip: COCONUT GROVE FL 33133

*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:** LOBO LANDA , CRISTINA

MGRM

03/11/2014

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

\_\_\_\_\_  
Date