## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000036256

Entity Name: CCLS 011236 LLC

**Current Principal Place of Business:** 

355 ALHAMBRA CIRCLE

SUITE 801

CORAL GABLES, FL 33134

**Current Mailing Address:** 

355 ALHAMBRA CIRCLE SUITE 801 CORAL GABLES, FL 33134 US

FEI Number: 30-0779983 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GURIAN, JORGE L 355 ALHAMBRA CIRCLE SUITE 801 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

Date

FILED Mar 26, 2015

**Secretary of State** 

CC9814615689

## Authorized Person(s) Detail:

Title MGRM

Name LOBO LANDA, CRISTINA Address 355 ALHAMBRA CIRCLE

SUITE 801

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: LOBO LANDA, CRISTINA

MGRM

03/26/2015

Date