

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000042676

**Entity Name:** REVERSE BRINDLE TRS, LLC

**Current Principal Place of Business:**

2319 SWANSON AVENUE  
MIAMI, FL 33133

**Current Mailing Address:**

2319 SWANSON AVENUE  
MIAMI, FL 33133

**FEI Number: 46-5544904**

**Certificate of Status Desired: Yes**

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

JAY HALPERN AND ASSOCIATES, P.A.  
150 ALHAMBRA CIRCLE  
1100  
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

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGR
Name	HALPERN, FRANK B	Name	HALPERN, RUSTY
Address	2319 SWANSON AVENUE	Address	2022 S.W. 84TH COURT
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33155

*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: FRANK HALPERN**

**MANAGER**

**05/01/2014**

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

\_\_\_\_\_  
Date