

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000055982

**Entity Name:** PHOENIX BABY LLC

**Current Principal Place of Business:**

5110 CAMPUS DRIVE  
140  
PLYMOUTH MEETING, PA 19462

**Current Mailing Address:**

5110 CAMPUS DRIVE  
SUITE 140  
PLYMOUTH MEETING, PA 19462

**FEI Number:** 46-4959879

**Certificate of Status Desired:** No

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

WALDMAN, GLEN H  
3250 MARY STREET  
SUITE 102  
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           MANAGER  
Name           WALDMAN, KENNETH C  
Address       5110 CAMPUS DRIVE  
                  140  
City-State-Zip: PLYMOUTH MEETING PA 19462

*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:** KENNETH C. WALDMAN

**OFFICE MANAGER**

**03/24/2015**

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

\_\_\_\_\_  
Date