

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000059567

**Entity Name:** 5838 COLLINS AVENUE #9G, LLC

**Current Principal Place of Business:**

1749 NE MIAMI COURT  
#309  
MIAMI, FL 33132

**Current Mailing Address:**

1749 NE MIAMI COURT  
#309  
MIAMI, FL 33132

**FEI Number:** 46-2745001

**Certificate of Status Desired:** No

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

SHOYKHET, MICHAEL  
1749 NE MIAMI COURT  
#309  
MIAMI, FL 33132 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 SHOYKHET, SOFIA  
Address 2122 E. 8TH STREET  
City-State-Zip: BROOKLYN NY 11223

Title MGRM  
Name SHOYKHET, ALEX  
Address 2122 E. 8TH STREET  
City-State-Zip: BROOKLYN NY 11223

*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:** ALEX SHOYKHET

**MANAGER**

**03/26/2016**

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

\_\_\_\_\_  
Date