

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000093222

**Entity Name:** CF EMPIRE MIAMI, LLC

**Current Principal Place of Business:**

253 NE 2ND ST  
312 SOUTH  
MIAMI, FL 33132

**Current Mailing Address:**

253 NE 2ND ST  
312 SOUTH  
MIAMI, FL 33132 US

**FEI Number:** 46-3213624

**Certificate of Status Desired:** No

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

PARROTTA, CLAUDIO  
253 NE 2ND ST  
312 SOUTH  
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 PARROTTA, CLAUDIO  
Address 253 NE 2ND AVE, #312  
City-State-Zip: MIAMI FL 33132

Title MGRM  
Name CARTUSCIELLO, FLOR  
Address 253 NE 2ND ST  
312 SOUTH  
City-State-Zip: MIAMI FL 33132

*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:** CARTUSCIELLO, FLOR

MGRM

04/18/2014

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

\_\_\_\_\_  
Date