

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000102558

**Entity Name:** FEDERATED EQUITIES, LLC

**Current Principal Place of Business:**

480 N PARKWAY  
GOLDEN BEACH, FL 33160

**Current Mailing Address:**

PO BOX 370008  
MIAMI, FL 33137 US

**FEI Number:** 46-3407710

**Certificate of Status Desired:** No

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

WEXLER, NIKOLAS T  
480 N PARKWAY  
GOLDEN BEACH, FL 33160 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	MGR	Title	MGR
Name	COX, JONATHAN J	Name	WEXLER, NIKOLAS T
Address	PO BOX 370008	Address	PO BOX 370008
City-State-Zip:	MIAMI FL 33137	City-State-Zip:	MIAMI FL 33137

*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:** JONATHAN J COX

**MANAGER**

**01/08/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date