| 1850 N.E. 198 TERRACE<br>NORTH MIAMI BEACH, FL 33179 US   |   |
|---|---|
| El Number: 46-3557478   | Certificate of Status Desired: No                     |
| Name and Address of Current Registered Agent:   |   |
| CUTLER, JEFF<br>1000 PONCE DE LEON BOULEVARD<br>SUITE 790<br>CORAL GABLES, FL 33146 US            |   |
| The above named entity submits this statement for the purpose of changing its registered office o | r registered agent, or both, in the State of Florida. |
| SIGNATURE: JEFF CUTLER  | 04/29/2016  |
| Electronic Signature of Registered Agent  | Date  |

### Th

Authorized Person(s) Detail :

| TitleMGRTitleMGRNameKRIEGER, MICHAELNameKRIEGER, RICHARDAddress4000 PONCE DE LEON BOULEVARD<br>SUITE 790Address4000 PONCE DE LEON BOULEVARD<br>SUITE 790City-State-Zip:CORAL GABLES FL 33146City-State-Zip:CORAL GABLES FL 33146 |                 |                       |                 |                       |  |  |
|--|-----------------|-----------------------|-----------------|-----------------------|--|--|
| Address 4000 PONCE DE LEON BOULEVARD Address 4000 PONCE DE LEON BOULEVARD   SUITE 790 SUITE 790 SUITE 790  | Title           | MGR                   | Title           | MGR                   |  |  |
| SUITE 790 SUITE 790  | Name            | KRIEGER, MICHAEL      | Name            | KRIEGER, RICHARD      |  |  |
| City-State-Zip: CORAL GABLES FL 33146 City-State-Zip: CORAL GABLES FL 33146  | Address         |                       | Address         |                       |  |  |
|  | City-State-Zip: | CORAL GABLES FL 33146 | City-State-Zip: | CORAL GABLES FL 33146 |  |  |

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: MICHAEL KRIEGER

MANAGER

04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date

# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000113461

Entity Name: MRK TRYON NC 2, LLC

#### **Current Principal Place of Business:**

4000 PONCE DE LEON BOULEVARD SUITE 790 CORAL GABLES, FL 33146

### **Current Mailing Address:**

#### FE

S

## N

#### FILED Apr 29, 2016 Secretary of State CC5981420665