

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000115337

**Entity Name:** LI-CALLAWALK, LLC

**Current Principal Place of Business:**

25101 CHAGRIN BOULEVARD  
SUITE 300  
BEACHWOOD, OH 44122

**FILED**  
**Mar 02, 2016**  
**Secretary of State**  
**CC2771666123**

**Current Mailing Address:**

25101 CHAGRIN BOULEVARD  
SUITE 300  
BEACHWOOD, OH 44122

**FEI Number:** 46-3453571

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name GOLDBERG, LARRY  
Address 25101 CHAGRIN BOULEVARD, SUITE 300  
City-State-Zip: BEACHWOOD OH 44122

Title MGR  
Name GOLDBERG, JORDAN  
Address 25101 CHAGRIN BOULEVARD, SUITE 300  
City-State-Zip: BEACHWOOD OH 44122

Title MGR  
Name BELL, ERIC  
Address 25101 CHAGRIN BOULEVARD, SUITE 300  
City-State-Zip: BEACHWOOD OH 44122

*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:** ERIC BELL

**MANAGER**

**03/02/2016**

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

\_\_\_\_\_  
Date