

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000139511

Entity Name: AIYARA, LLC**Current Principal Place of Business:**3470 NW 82ND AVENUE, SUITE 988
DORAL, FL 33122**Current Mailing Address:**3470 NW 82ND AVENUE, SUITE 988
DORAL, FL 33122 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SILVERMAN, LAWRENCE D
10725 GRIFFING BLVD.
BISCAYNE PARK, FL 33161 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	ARREERATN, PIYARAT
Address	800 SOUTH RAINBOW DRIVE
City-State-Zip:	HOLLYWOOD FL 33021
Title	MEMBER
Name	TCS PRIVATE EQUITY III, LLC – SERIES 30
Address	ONE NORTH WACKER DRIVE, SUITE 3605
City-State-Zip:	CHICAGO IL 60606
Title	MEMBER
Name	ARREERATN, PIYARAT
Address	800 SOUTH RAINBOW DRIVE
City-State-Zip:	HOLLYWOOD FL 33021

Title	MEMBER
Name	ADVANTAIRA TRUST, LLC FBO LAWRENCE D SILVERMAN IRA 7343301
Address	10725 GRIFFING BLVD.
City-State-Zip:	BISCAYNE PARK FL 33161
Title	MEMBER
Name	SHOMA WORLD ENTERTAINMENT, LLC
Address	3470 NW 82ND AVENUE, SUITE 988
City-State-Zip:	DORAL FL 33122

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: LAWRENCE SILVERMAN**MEMBER****10/15/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date