

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000150510

**Entity Name:** SLISE LLC

**Current Principal Place of Business:**

7737 N.E 8 AVE  
MIAMI, FL 33138

**Current Mailing Address:**

7737 N.E 8 AVE  
MIAMI, FL 33138

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LATTERNER, SEAN M  
7737 N.E 8 AVE  
MIAMI, FL 33138 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 LATTERNER, SEAN M  
Address 7737 N.E 8 AVE  
City-State-Zip: MIAMI FL 33138

Title MGRM  
Name HEYECK, LISA J  
Address 658 NE 74 STREET  
City-State-Zip: MIAMI FL 33138

*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:** LISA HEYECK

MGRM

01/08/2016

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

\_\_\_\_\_ Date