

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000063510

**FILED  
Mar 01, 2016  
Secretary of State  
CC9490529285**

**Entity Name:** TAUNI, LLC

**Current Principal Place of Business:**

C/O THERREL BAISDEN, LLP  
SUNTRUST INTL' CTR, 1 S.E. 3RD AVE, #2950  
MIAMI, FL 33131

**Current Mailing Address:**

C/O THERREL BAISDEN, LLP  
SUNTRUST INTL' CTR, 1 S.E. 3RD AVE, #2950  
MIAMI, FL 33131 US

**FEI Number:** 90-1065269

**Certificate of Status Desired:** No

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

FEUERMAN, JONATHAN ESQ.  
C/O THERREL BAISDEN, LLP  
SUNTRUST INTL' CTR, 1 S.E. 3RD AVE, #2950  
MIAMI, FL 33131 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 GARZON, ISAAC  
Address 17001 COLLINS AVENUE, APT 2307  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name GARZON, LYNN  
Address 17001 COLLINS AVENUE, APT 2307  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title MGR  
Name GARZON, JACOB  
Address 17001 COLLINS AVENUE, APT 2307  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** LYNN GARZON

**MANAGER**

**03/01/2016**

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

\_\_\_\_\_  
Date