## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000064045

Entity Name: GUITAR HOSPITAL, L.L.C.

**Current Principal Place of Business:** 

235 NE 6TH AVENUE, SUITE G DELRAY BEACH, FL 33483

**Current Mailing Address:** 

235 NE 6TH AVENUE, SUITE G DELRAY BEACH. FL 33483

FEI Number: 59-2126793 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLETT, MESCHES & JOHNSON, P.L. 2855 PGA BOULEVARD, SUITE 100 PALM BEACH GARDENS, FL 33410 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

**FILED** Feb 19, 2015

**Secretary of State** 

CC2523886651

## Authorized Person(s) Detail:

Title **AMBR** 

Name DACHER, MICHEL E

Address 235 NE 6TH AVENUE, SUITE G City-State-Zip: DELRAY BEACH FL 33483

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: MICHEL E. DACHER

**MEMBER** 

02/19/2015