

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000122002

Entity Name: CSB5 LLC

Current Principal Place of Business:

3623 N ANDREWS AVE
MIAMI BEACH, FL 33139

Current Mailing Address:

3623 N ANDREWS AVE
MIAMI BEACH, FL 33139 US

FEI Number: 47-1510348

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHARD M. MOGERMAN, P.A.
8211 WEST BROWARD BOULEVARD
SUITE 200
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	Title	MANAGER
Name	BROWN, BARNETT	Name	CRUISE, ROBIN
Address	3623 N ANDREWS AVE	Address	3623 N ANDREWS AVE
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

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: ROBIN.CRUISE@GMAIL.COM

MGR

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date