

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000141086

**Entity Name:** SKYLINE NYC LLC

**Current Principal Place of Business:**

1915 BRICKELL AVE  
C1010  
MIAMI, FL 33129

**Current Mailing Address:**

1915 BRICKELL AVE  
C1010  
MIAMI, FL 33129 US

**FEI Number:** 47-1798419

**Certificate of Status Desired:** No

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

TAX & ACCOUNTING SOLUTIONS  
616 ATLANTIC SHORES BLVD  
C  
HALLANDALE, FL 33009 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:** CARLOS GONZALEZ

03/17/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name GOMEZ, SANDRA F  
Address 1915 BRICKELL AVE  
C1010  
City-State-Zip: MIAMI FL 33129

Title AMBR  
Name ABREU, JESUS R  
Address 1915 BRICKELL AVE  
C1010  
City-State-Zip: MIAMI FL 33129

*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:** SANDRA GOMEZ

AMBR

03/17/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date