

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000159916

**Entity Name:** BAYFRONT LAW CENTER, L.L.C.**Current Principal Place of Business:**CAUSEWAY SQUARE, 1801 NE 123RD ST, STE 409  
NORTH MIAMI, FL 33181**Current Mailing Address:**CAUSEWAY SQUARE, 1801 NE 123RD ST, STE 409  
NORTH MIAMI, FL 33181**FEI Number:** 47-2301185**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BELLEH, OWEI Z ESQ.  
CAUSEWAY SQUARE, 1801 NE 123RD ST, STE 409  
NORTH MIAMI, FL 33181 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 LAW OFFICES OF ANDELL K. BROWN,  
ESQ., P.L.  
Address CAUSEWAY SQUARE, 1801 NE 123RD  
ST, STE 409  
City-State-Zip: NORTH MIAMI FL 33181

Title AMBR  
Name BELLEH LAW GROUP, P.L.L.C.  
Address CAUSEWAY SQUARE  
1801 NE 123RD STREET STE 409  
City-State-Zip: NORTH MIAMI FL 33181

Title AMBR  
Name URMAN LAW GROUP, P.A.  
Address CAUSEWAY SQUARE, 1801 NE 123RD  
ST, STE 409  
City-State-Zip: NORTH MIAMI FL 33181

Title MGR  
Name SASHA WESTERMAN-KEUNING, P.A.  
Address CAUSEWAY SQUARE, 1801 NE 123RD  
ST, STE 409  
City-State-Zip: NORTH MIAMI FL 33181

Title AMBR  
Name ROSTOVA LAW GROUP, P.A.  
Address CAUSEWAY SQUARE, 1801 NE 123RD  
ST, STE 409  
City-State-Zip: NORTH MIAMI FL 33181

*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:** ANDELL K. BROWN, ESQ.**MANAGING MEMBER****04/07/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date