

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000048869

**Entity Name:** MLTPB2 LLC

**Current Principal Place of Business:**

606 OLMSTED RD  
STANFORD, CA 94305

**Current Mailing Address:**

606 OLMSTED RD  
STANFORD, CA 94305

**FEI Number:** 47-3431861

**Certificate of Status Desired:** No

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

ROBINSON, DWAYNE C  
5353 CAPITAL CIRCLE SW  
TALLAHASSEE, FL 32305 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 BLOOMGREN, MICHAEL S  
Address 606 OLMSTED RD  
City-State-Zip: STANFORD CA 94305

*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: MICHAEL S. BLOOMGREN**

**MANAGER**

**04/16/2016**

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

\_\_\_\_\_  
Date