

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000061021

**Entity Name:** 3225-N AXIS LLC

**Current Principal Place of Business:**

700 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33325

**Current Mailing Address:**

700 SAWGRASS CORPORATE PARKWAY  
SUNRISE, FL 33325 US

**FEI Number:** 47-3681304

**Certificate of Status Desired:** No

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

JC CONSULTING GROUP LLC  
1634 ORCHID BEND  
WESTON, FL 33327 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 AMBR  
Name ORIOL, JOAQUIN  
Address 2918 MEDINAH  
City-State-Zip: WESTON FL 33166

Title AMBR  
Name ORIOL, SUSY E  
Address 1003 TRAIL MORE LANE  
City-State-Zip: WESTON FL 33326

Title AMBR  
Name KARSO LLC  
Address 1555 SOUTH OCEAN LANE  
City-State-Zip: FORT LAUDERDALE FL 33316

*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:** JOAQUIN ORIOL

**MANAGER**

**01/30/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date