

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000137023

**Entity Name:** SPIF, LLC

**Current Principal Place of Business:**

401 E. LAS OLAS BLVD  
SUITE 130-638  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

401 E. LAS OLAS BLVD  
SUITE 130-638  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
13302 WINDING OAK COURT  
A  
TAMPA, FL 33612 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 WYMAN, ARIC  
Address 3920 W. BROWARD BLVD.  
APT 207  
City-State-Zip: PLANTATION FL 33312

Title AMBR  
Name TAL, OFER  
Address 26 SUMMIT AVE APT. #5  
City-State-Zip: BROOKLINE MA 02446

*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:** ARIC WYMAN

AMBR

01/15/2016

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

\_\_\_\_\_  
Date