

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000203345

**FILED**  
**Apr 27, 2016**  
**Secretary of State**  
**CC6889774246**

**Entity Name:** RIDGEPORT-LUDA 2, LLC

**Current Principal Place of Business:**

1475 W. CYPRESS CREEK RD., SUITE 300  
FORT LAUDERDALE, FL 33309

**Current Mailing Address:**

1475 W. CYPRESS CREEK RD., SUITE 300  
FORT LAUDERDALE, FL 33309

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PBYA CORPORATE SERVICES, LLC  
200 S.ANDREWS AVENUE, SUITE 600  
FORT LAUDERDALE, FL 33301 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 SZAPIRO, URI  
Address 1475 W. CYPRESS CREEK RD., SUITE 300  
City-State-Zip: FORT LAUDERDALE FL 33309

Title MGR  
Name SZAPIRO, DOV  
Address 1475 W. CYPRESS CREEK RD., SUITE 300  
City-State-Zip: FORT LAUDERDALE FL 33309

Title MGR  
Name SZAPIRO, AVI  
Address 1475 W. CYPRESS CREEK RD., SUITE 300  
City-State-Zip: FORT LAUDERDALE FL 33309

*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:** URI SZAPIRO

**MGR**

**04/27/2016**

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

\_\_\_\_\_  
Date