

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000113646

**Entity Name:** ZILIES MANAGEMENT LLC

**Current Principal Place of Business:**

4025 WEST MCNAB RD  
E110  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

4025 WEST MCNAB RD  
E110  
POMPANO BEACH, FL 33069 US

**FEI Number:** 82-3544433

**Certificate of Status Desired:** Yes

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

EXCEUS, ROSEMITTE  
4025 WEST MCNAB RD  
E110  
POMPANO BEACH, FL 33069 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            EXCEUS, ROSEMITTE  
Address        4025 WEST MCNAB RD  
                  E110  
City-State-Zip: POMPANO BEACH FL 33069

*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:** ROSEMITTE EXCEUS

03/13/2018

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

\_\_\_\_\_  
Date