

**2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000002743

**Entity Name:** SF TAMPA, LLC

**Current Principal Place of Business:**

1818 EAST FLETCHER AVENUE  
TAMPA, FL 33612

**Current Mailing Address:**

40 SOUTH PALAFOX PLACE, SUITE 400  
PENSACOLA, FL 32502 US

**FEI Number:** 26-2693802

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 MGRM  
Name FLORIDA FACILITIES, LLC  
Address 4 WEST RED OAK LN.  
City-State-Zip: WHITE PLAINS NY 10604

*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:** CRAIG ROBINSON

**PRESIDENT**

**04/27/2015**

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

\_\_\_\_\_  
Date