## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000001657

Entity Name: ORLANDO BATHING SUIT, LLC

**Current Principal Place of Business:** 

5337, MILLENIA LAKES BLVD

400

ORLANDO, FL 32839

**Current Mailing Address:** 

5337, MILLENIA LAKES BLVD

400

ORLANDO, FL 32839

FEI Number: 26-4750194 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:

Address

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name RAB ACQUISITION LLC Name ORLANDO BATHING SUIT

(HOLDINGS) LLC

Address 1345 AVENUE OF THE AMERICAS
City-State-Zip: NEW YORK NY 10011

ity-State-Zip: NEW YORK NY 10011 City-State-Zip: NEW YORK NY 10105

Title MGRM

Name FORTRESS VALUE RECOVERY FUND Name BLUMENTHAL, RANDALL A

I, LLC

Address 1345 AVENUE OF THE AMERICAS Address 5337, MILLENIA LAKES BLVD, SUITE 400

City-State-Zip: NEW YORK NY 10105 City-State-Zip: ORLANDO FL 32839

Title PRES

Name ARNOLD, SHEILA

Address 5337, MILLENIA LAKES BLVD, SUITE

205 WEST 19TH STREET

400

City-State-Zip: ORLANDO FL 32839

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.

CEO

SIGNATURE: SHEILA ARNOLD

Electronic Signature of Signing Authorized Person(s) Detail

02/13/2015

FILED Feb 13, 2015

**Secretary of State** 

CC3808500872

Date