

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M11000006140

**Entity Name:** BOBTWO GA-FL LLC

**Current Principal Place of Business:**

BOBTWO GA-FL LLC  
C/O NORMAN BOBROW & CO., INC. 488 MADISON AVENUE, 19TH FLOOR  
NEW YORK, NY 10022

**Current Mailing Address:**

BOBTWO GA-FL LLC  
C/O NORMAN BOBROW & CO., INC. 488 MADISON AVENUE, 19TH FLOOR  
NEW YORK, NY 10022 US

**FEI Number:** 45-3991111

**Certificate of Status Desired:** No

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

VCORP SERVICES, LLC  
5011 SOUTH STATE ROAD 7, SUITE 106  
DAVIE, FL 33314 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 BOBROW, WAYNE  
Address BOBTWO GA-FL LLC  
C/O NORMAN BOBROW & CO., INC.  
488 MADISON AVENUE, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title MGRM  
Name BOBROW, NORMAN  
Address BOBTWO GA-FL LLC  
C/O NORMAN BOBROW & CO., INC.  
488 MADISON AVENUE, 19TH FLOOR  
City-State-Zip: NEW YORK NY 10022

Title MGRM  
Name MICHAEL, JACOBSEN  
Address BOBTWO GA-FL LLC  
C/O NORMAN BOBROW & CO.,  
INC. 488 MADISON AVENUE, 19TH  
FLOOR  
City-State-Zip: NEW YORK NY 10022

*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:** WAYNE BOBROW

**MANAGER**

**01/05/2016**

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

\_\_\_\_\_  
Date