

2013 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

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FILED
Apr 24, 2013
Secretary of State
CC1475508464

Entity Name: SFLC BUILDING 1 LLC

Current Principal Place of Business:

2855 LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134

Current Mailing Address:

2855 LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, KOLLEEN O.P.
2855 LEJEUNE ROAD 4TH FLOOR
CORAL GABLES, FL 33134 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 SFLC HOLDINGS LLC
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title PRESIDENT
Name SIGNORELLO, VINCENT
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VP, SECRETARY
Name COBB, KOLLEEN
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name TICKELL, KEITH
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VPT
Name GODOY, JUAN
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

Title VPAS
Name RODON, RAFAEL
Address 2855 LEJEUNE ROAD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KOLLEEN COBB

ATTORNEY IN FACT

04/24/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date