ne and Address of Current Registered Agent:
PORATION SERVICE COMPANY HAYS STREET .AHASSEE, FL 32301-2525 US
bove named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the S
NATURE:
Electronic Signature of Registered Agent

# Entity Name: OMNINET VILLAGE GP, LLC

**Current Principal Place of Business:** 

9420 WILSHIRE BLVD 4TH FLOOR BEVERLY HILLS, CA 90212

DOCUMENT# M13000004553

### **Current Mailing Address:**

9420 WILSHIRE BLVD 4TH FLOOR **BEVERLY HILLS. CA 90212** 

## FEI Number: 46-3159168

### سامام ۸ - - -۸ I. 4 D Nam

CORP 1201 H TALLA

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

# Certificate of Status Desired: No

The ab State of Florida.

SIGN

## Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	NAZARIAN, BENJAMIN	Name	COSTANTINI, ANDREA
Address	9420 WILSHIRE BLVD 4TH FLOOR	Address	9420 WILSHIRE BLVD 4TH FLOOR
City-State-Zip:	BEVERLY HILLS CA 90212	City-State-Zip:	BEVERLY HILLS CA 90212
Title	MGRM		
Title Name	MGRM DANIELPOUR, MICHAEL		
Name	DANIELPOUR, MICHAEL		

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: ANDREA COSTANTINI

MANAGER

Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Mar 18, 2014 Secretary of State CC5322433383