## **2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M14000000134

Entity Name: SFLC BUILDING 2 LLC

**Current Principal Place of Business:** 

2855 LEJEUNE RD 4TH FLOOR CORAL GABLES, FL 33134

**Current Mailing Address:** 

2855 LEJEUNE RD 4TH FLOOR CORAL GABLES, FL 33134 US

FEI Number: 80-0963774 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COBB, KOLLEEN 2855 LEJEUNE RD 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

Date

FILED Jan 09, 2017

**Secretary of State** 

CC5118993615

## Authorized Person(s) Detail:

Title PRESIDENT Title VP

Name SIGNORELLO, VINCENT Name MARCUS, DANIEL

Address 2855 LEJEUNE RD 4TH FLOOR Address 2855 LEJEUNE RD 4TH FLOOR

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title VP, SECRETARY Title VP, TREASURER
Name COBB, KOLLEEN Name GODOY, JUAN

Address 2855 LEJEUNE RD 4TH FLOOR Address 2855 LEJEUNE RD 4TH FLOOR
City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title VP, ASST. SECRETARY Title VP

NameMARTINEZ, MARGARITA M.NameSNYDER, MARSHALL BRUCEAddress2855 LEJEUNE RD 4TH FLOORAddress2855 LEJEUNE RD 4TH FLOORCity-State-Zip:CORAL GABLES FL 33134City-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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KOLLEEN COBB VICE PRESIDENT 01/09/2017