### 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M1400000134

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

## Name and Address of Current Registered Agent:

COBB, KOLLEEN 2855 LEJEUNE RD 4TH FLOOR CORAL GABLES, FL 33134 US FILED Jan 09, 2017 Secretary of State CC5118993615

Date

Certificate of Status Desired: No

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

### 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
Name	MARTINEZ, MARGARITA M.	Name	SNYDER, MARSHALL BRUCE
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

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

Electronic Signature of Signing Authorized Person(s) Detail

Date