

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000024646

Entity Name: 215 CLEMATIS, LLC

FILED  
Jan 06, 2009  
Secretary of State

**Current Principal Place of Business:**

215 CLEMATIS STREET  
WEST PALM BEACH, FL 33401

**New Principal Place of Business:**

**Current Mailing Address:**

437 LINCOLN RD  
MIAMI BEACH, FL 33139

**New Mailing Address:**

FEI Number: 20-0234917

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SPRING, ELLIOT  
18671 COLLINS AVE, # 2902  
SUNNY ISLES, FL 33160 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: P ( ) Delete  
Name: SPRUNG, ELLIOT  
Address: 18671 COLLINS AVE, # 2902  
City-St-Zip: SUNNY ISLES, FL 33160

Title: PC ( ) Delete  
Name: SPRUNG, DAVID  
Address: 19111 COLLINS AVE #607  
City-St-Zip: SUNNY ISLES, F 33160

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: ELLIOT SPRUNG

MGR

01/06/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date