

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000052190

**Entity Name:** UNIT 3204 ICONBRICKELL, LLC

**FILED**  
**Apr 03, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

495 BRICKELL AVENUE  
UNIT 3204  
MIAMI, FL 33131 US

**New Principal Place of Business:**

**Current Mailing Address:**

14 NE 1ST AVENUE  
2ND. FLOOR  
MIAMI, FL 33132 US

**New Mailing Address:**

**FEI Number:** 38-3854330

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS G. SHERMAN, P.A.  
90 ALMERIA AVENUE  
CORAL GABLES, FL 33134 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: MGRM  
Name: SARTORI, DANIEL Q  
Address: 14 NE 1ST AVENUE, 2ND FLOOR  
City-St-Zip: MIAMI, FL 33132 US

I hereby 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: DANIEL Q. SARTORI

MGRM

04/03/2012

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