

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000112208

Entity Name: THL1514, LLC

**FILED**  
**Apr 07, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

1119 COTORRO AVENUE  
C/O THE HOUSING LEAGUE, INC.  
CORAL GABLES, FL 33146

**New Principal Place of Business:**

1717 NORTH BAYSHORE DRIVE  
SUITE 102  
MIAMI, FL 33132

**Current Mailing Address:**

1119 COTORRO AVENUE  
C/O THE HOUSING LEAGUE, INC.  
CORAL GABLES, FL 33146

**New Mailing Address:**

1717 NORTH BAYSHORE DRIVE  
SUITE 102  
MIAMI, FL 33132

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FLICK, SANDY  
1119 COTORRO AVENUE  
CORAL GABLES, FL 33146 US

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

FALSETTO, MICHAEL  
1717 NORTH BAYSHORE DRIVE  
SUITE 102  
MIAMI, FL 33132 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: MICHAEL FALSETTO

04/07/2014

Electronic Signature of Registered Agent

Date

**AUTHORIZED PERSONS:**

Title: MGR  
Name: FALSETTO, MICHAEL  
Address: 1717 NORTH BAYSHORE DRIVE SUITE 102  
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 authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: MICHAEL FALSETTO

MGR

04/07/2014

Electronic Signature of Authorized Person

Date