

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2008 08:00 A
Secretary of State

DOCUMENT # L96000001234

1. Entity Name
DEKLE REALTY, L.C.



Principal Place of Business
10556 N.W. 26TH ST., #D-203
MIAMI, FL 33172

Mailing Address
10556 N.W. 26TH ST., #D-203
MIAMI, FL 33172



01212008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0712189

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ARROM, ORLANDO
10556 N.W. 26TH STREET
SUITE 203
MIAMI, FL 33172

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity sub-
scribes to the obligations of registered

of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and acc-

SIGNATURE _____

Signature, type

Registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LAU, GORDON
29 SPRING STREET, #5
NEW YORK, NY 10012

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000862901
04/03/08-80071-007 138.75

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _____