

T04000001099

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

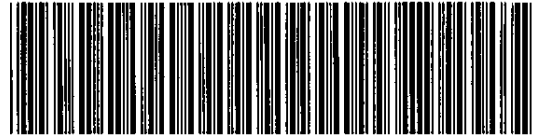
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Assignment
T04-1099 ✓✓

FILED
14 JUL 15 PM 12:30
SEALY STATE
TALLAHASSEE, FLORIDA

JUL 16 2014

N. CAUSSEUX

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: One Bal Harbour
(Name of Mark to be assigned)

Dear Sir or Madam:

The enclosed Mark Assignment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven C. Cronig
(Name of Person)

Hinshaw & Culbertson LLP
(Firm/Company)

2525 Ponce de Leon Blvd
(Address)

Coral Gables, FL 33134
(City/State and Zip Code)

For further information concerning this matter, please call:

Steven C. Cronig at (305) 428-5122
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILING FEE: \$50 per class

ASSIGNMENT OF MARK REGISTRATION

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

1. The mark to be assigned is: One Bal Harbour

2. Registration Number: T04000001099

3. (a) Assignor's name: Elcom Hotel & Spa, LLC

(b) Assignor's Business Address: 10295 Collins Avenue

Bal Harbour, FL 33154

City/State/Zip

If Different, Assignor's Mailing Address: _____

City/State/Zip

4. (a) Assignee's name: One Bal Harbour Hotel Facilities, LLC

(b) Assignee's Business Address: 10295 Collins Avenue

Bal Harbour, FL 33154

City/State/Zip

If Different, Assignee's Mailing Address: _____

City/State/Zip

(c) Assignee's telephone number: (305) 428-5122

Individual Corporation Joint Venture Limited Liability Company

General Partnership Limited Partnership Union Other: _____

If other than an individual,

(1) Florida registration/ document number: L13000175142 (2) Domicile State: FL

(3) Federal Employer Identification Number: 46-4350445

5. All right, title and interest in and to said mark, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of and symbolized by the mark) is hereby

assigned by Elcom Hotel & Spa, LLC to One Bal Harbour Hotel Facilities, LLC
(the Assignor) (the Assignee)

6. Assignor's Signature: _____
[Handwritten Signature]

By Michael Goldberg, Liquidating Trustee
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 30th day of June, 2014, Michael Goldberg
(Name of Individual Signing)

who is personally known to me whose identity I proved on the basis of _____



[Handwritten Signature]
Signature of Notary Public

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Assignee's Signature: _____

By _____
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this _____ day of _____, _____
(Name of Individual Signing)

who is personally known to me whose identity I proved on the basis of _____

(Notary Seal)

Signature of Notary Public

FILING FEE: \$50 per class
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

5. All right, title and interest in and to said mark, together with the good will of the business in which the mark is used (or that part of the good will of the business connected with the use of and symbolized by the mark) is hereby

assigned by Elcom Hotel & Spa, LLC to One Bal Harbour Hotel Facilities, LLC
(the Assignor) (the Assignee)

6. Assignor's Signature: _____
[Handwritten Signature]

By Michael Goldberg, Liquidating Trustee
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 30th day of June, 2014, Michael Goldberg
(Name of Individual Signing)

who is personally known to me whose identity I proved on the basis of _____



Kim Mayregano
Signature of Notary Public

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STATE
TALLAHASSEE, FLORIDA

7. Assignee's Signature: _____
[Handwritten Signature]

By MICHAEL SHEHADI
(Typed or Printed Name of Person Signing Above)

Sworn to and subscribed before me on this 2 day of July, 2014, Michael Shehadi
(Name of Individual Signing)

who is personally known to me whose identity I proved on the basis of _____

(Notary Seal)

Eileen Morales
Signature of Notary Public

FILING FEE: \$50 per class
Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

