

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L00000000011

**Entity Name:** MARGOLIS FAMILY, LLC

**Current Principal Place of Business:**

2 GROVE ISLE DRIVE  
B-209  
MIAMI, FL 33133

**Current Mailing Address:**

2 GROVE ISLE DRIVE  
B-209  
MIAMI, FL 33133

**FEI Number:** 65-0980240

**Certificate of Status Desired:** No

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

BESKIN, JAY R  
6500 COWPEN ROAD  
STE 204  
MIAMI LAKES, FL 33014 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MARGOLIS, GWEN  
Address 2 GROVE ISLE DRIVE, B-209  
City-State-Zip: MIAMI FL 33133

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GWEN MARGOLIS

**MANAGER**

**04/29/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date