

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L01000021583

**FILED  
Mar 13, 2018  
Secretary of State  
CC4668512759**

**Entity Name:** LJT, LLC

**Current Principal Place of Business:**

360 ARVIDA PKWY.  
CORAL GABLES, FL 33156

**Current Mailing Address:**

360 ARVIDA PKWY.  
CORAL GABLES, FL 33156

**FEI Number:** 26-7665038

**Certificate of Status Desired:** No

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

TEPER, L. JAMES  
360 ARVIDA PKWY  
CORAL GABLES, FL 33156 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 L. JAMES TEPER REVOCABLE TRUST  
DATED 6/13  
Address 360 ARVIDA PARKWAY  
City-State-Zip: CORAL GABLES FL 33156

Title MGRM  
Name TEPER, MICHAEL ADAM MGR  
Address 360 ARVIDA PKWY.  
City-State-Zip: CORAL GABLES FL 33156

*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:** L JAMES TEPER

MGRM, TRTEE

03/13/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date