

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000011663

**Entity Name:** WEST DIXIE HWY LLC

**Current Principal Place of Business:**

12700 WEST DIXIE HWY  
N MIAMI, FL 33161

**Current Mailing Address:**

PO BOX 381703  
MIAMI, FL 33238

**FEI Number:** 01-0807771

**Certificate of Status Desired:** No

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

LEONI, TODD M  
12700 WEST DIXIE HWY  
N MIAMI, FL 33161 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 MGR  
Name LEONI, TODD M  
Address PO BOX 381703  
City-State-Zip: MIAMI FL 33238

*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:** TODD LEONI

**PRESIDENT**

**03/19/2015**

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

\_\_\_\_\_  
Date