

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000036663

**Entity Name:** ROSEMAX GP, LLC

**Current Principal Place of Business:**

800 KEELER  
BERKELEY, CA 94708

**Current Mailing Address:**

7700 N. KENDALL DRIVE  
807  
MIAMI, FL 33156

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PARNES, LAURENCE A  
7700 NORTH KENDALL DRIVE  
SUITE 708  
MIAMI, 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 PARNES, VIRGINIA A  
Address 800 KEELER  
City-State-Zip: BERKELEY CA 94708

*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:** VIRGINIA A PARNES

**PARTNER**

**01/14/2015**

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

\_\_\_\_\_  
Date