

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000043669

Entity Name: NORTH 25, LLC

Current Principal Place of Business:

355 ALHAMBRA CIRCLE SUITE #950
CORAL GABLES, FL 33134

Current Mailing Address:

355 ALHAMBRA CIRCLE
ATTEN: TOM BYRNE SUITE #950
CORAL GABLES, FL 33134 US

FEI Number: 06-1729690

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BYRNE, THOMAS
355 ALHAMBRA CIRCLE SUITE #950
CORAL GABLES, FL 33134 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 BYRNE, THOMAS E
Address 355 ALHAMBRA CIRCLE SUITE #950
City-State-Zip: MIAMI FL 33134

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: THOMAS E. BYRNE

MANAGING PARTNER

02/23/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date