

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 23, 2017
Secretary of State
CC5632473201

Entity Name: GABLES OFFICE BUILDING LLC

Current Principal Place of Business:

3211 PONCE DE LEON BLVD., SUITE 301
CORAL GABLES, FL 33134

Current Mailing Address:

3211 PONCE DE LEON BLVD., SUITE 301
CORAL GABLES, FL 33134 US

FEI Number: 46-3014907

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZOVLOCK, LYNN
8730 NW 36 AVENUE
MIAMI, FL 33147 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 BARKER, REX M
Address 3211 PONCE DE LEON BLVD., SUITE 301
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER
Name MILTON, JOSEPH
Address 3211 PONCE DE LEON BLVD., SUITE 301
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER
Name MILTON, CECIL
Address 3211 PONCE DE LEON BLVD., SUITE 301
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER
Name MILTON, FRANK
Address 3211 PONCE DE LEON BLVD., SUITE 301
City-State-Zip: CORAL GABLES 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: REX BARKER

MGR

02/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date