

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000037455

Entity Name: NW 15TH LLC

Current Principal Place of Business:

60 EDGEWATER DR.
PH 1A
CORAL GABLES, FL 33133

Current Mailing Address:

P.O. BOX 141188
CORAL GABLES, FL 33114 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SMOLEV, STEVEN
60 EDGEWATER DR.
PH 1A
CORAL GABLES, FL 33133 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 D
Name SMOLEV, STEVEN
Address 60 EDGEWATER DR.
 PH 1A
City-State-Zip: CORAL GABLES FL 33133

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: STEVEN SMOLEV

DIRECTOR

04/27/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date