

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061539

Entity Name: COHEN COMMERCIAL MANAGEMENT, LLC

Current Principal Place of Business:

5041 OKEECHOBEE BOULEVARD
WEST PALM BEACH, FL 33417

Current Mailing Address:

P.O. BOX 223244
WEST PALM BEACH, FL 33422

FEI Number: 76-0837680

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COHEN, FRED C
712 U.S. HIGHWAY ONE, SUITE 400
NORTH PALM BEACH, FL 33408 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 COHEN, BRYAN
Address 712 U.S. HIGHWAY ONE, SUITE 400
City-State-Zip: NORTH PALM BEACH FL 33408

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: BRYAN COHEN

MGRM

04/16/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date