## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000111295

Entity Name: NORTHSIDE OFFICES, LLC

**Current Principal Place of Business:** 

3319 STATE ROAD 7 SUITE 313 WELLINGTON, FL 33449

**Current Mailing Address:** 

3319 STATE ROAD 7 SUITE 313 WELLINGTON, FL 33449

FEI Number: 20-8202535 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABDOLVAHABI, RAMIN M 3319 STATE ROAD 7 SUITE 313 WELLINGTON, FL 33449 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 Title MGR

Name ABDOLVAHABI, RAMIN Name ALVAREZ, RAMON

Address 3319 STATE ROAD 7, SUITE 313 Address 3319 STATE ROAD 7, SUITE 313

City-State-Zip: WELLINGTON FL 33449 City-State-Zip: WELLINGTON FL 33449

Title MGR

Name LEVINE, MARC

Address 3319 STATE ROAD 7, SUITE 313

City-State-Zip: WELLINGTON FL 33449

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: RAMIN ABDOLVAHABI

Electronic Signature of Signing Authorized Person(s) Detail

MGR 01/29/2017

Date

FILED Jan 29, 2017

**Secretary of State** 

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