

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000001780

**FILED**  
**Jan 13, 2014**  
**Secretary of State**  
**CC1294636435**

**Entity Name:** EVENSKY & KATZ, LLC

**Current Principal Place of Business:**

2333 PONCE DE LEON BLVD., P.H., STE. 1100  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2333 PONCE DE LEON BLVD., P.H., STE. 1100  
CORAL GABLES, FL 33134

**FEI Number:** 20-8261109

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MULLER, CHARLES EII  
7385 GALLOWAY ROAD, SUITE 200  
MIAMI, FL 33173 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 EVENSKY, HAROLD R  
Address 2333 PONCE DE LEON BLVD., SUITE 1100  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name KATZ, DEENA B  
Address 2333 PONCE DE LEON BLVD., SUITE 1100  
City-State-Zip: CORAL GABLES FL 33134

Title T  
Name BIELOW, MARIA C  
Address 2333 PONCE DE LEON BLVD., SUITE 1100  
City-State-Zip: CORAL GABLES FL 33134

Title S  
Name JONES, LANE M  
Address 2333 PONCE DE LEON BLVD., SUITE 1100  
City-State-Zip: CORAL GABLES FL 33134

Title VP  
Name MCGRATH, MATTHEW A  
Address 2333 PONCE DE LEON BLVD., SUITE 1100  
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:** MARIA C BIELOW

**TREASURER**

**01/13/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date