

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000020216

**FILED**  
**Jan 12, 2015**  
**Secretary of State**  
**CC4015438148**

**Entity Name:** CITY OUTDOOR FLORIDA, LLC

**Current Principal Place of Business:**

2645 S BAYSHORE DRIVE #2002  
COCONUT GROVE, FL 33131

**Current Mailing Address:**

2645 S BAYSHORE DRIVE #2002  
COCONUT GROVE, FL 33131 US

**FEI Number:** 26-0381869

**Certificate of Status Desired:** No

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

KENNEDY, ROSARIO  
2645 S BAYSHORE DRIVE #2002  
COCONUT GROVE, FL 33131 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 ATKINS, CHET  
Address 2645 S BAYSHORE DRIVE #2002  
City-State-Zip: COCONUT GROVE FL 33131

Title MGR  
Name DEL MASTRO, RICK  
Address 2645 S BAYSHORE DRIVE #2002  
City-State-Zip: COCONUT GROVE FL 33131

Title MGR  
Name CARR, CHRIS  
Address 2645 S BAYSHORE DRIVE #2002  
City-State-Zip: COCONUT GROVE FL 33131

Title MGR  
Name LUKIS, SYLVESTER  
Address 2645 S BAYSHORE DRIVE #2002  
City-State-Zip: COCONUT GROVE FL 33131

*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:** RICK DEL MASTRO

**MGR**

**01/12/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date