

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000089336

**Entity Name:** WAREHOUSE 534 LLC

**Current Principal Place of Business:**

1437 NE 4 AVENUE  
FORT LAUDERDALE, FL 33304

**Current Mailing Address:**

524 ISLE OF CAPRI DRIVE  
FORT LAUDERDALE, FL 33301

**FEI Number:** 26-3374589

**Certificate of Status Desired:** No

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

LYNN, BRIAN  
TWO UNIVERSITY DRIVE  
SUITE 215  
PLANTATION, FL 33324 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 BATES, JAMES T  
Address 524 ISLE OF CAPRI  
City-State-Zip: FT. LAUDERDALE FL 33301

Title MGRM  
Name BATES, CATIA  
Address 524 ISLE OF CAPRI  
City-State-Zip: FT. LAUDERDALE FL 33301

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JAMES T. BATES

MGRM

03/27/2013

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

\_\_\_\_\_  
Date