

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000100670

**Entity Name:** UNIT 1817, LLC

**Current Principal Place of Business:**

C/O JOSEPH BRAUN  
52 WEST 69TH STREET, APT. 2A  
NEW YORK, NY 10023

**Current Mailing Address:**

C/O JOSEPH BRAUN  
52 WEST 69TH STREET, APT. 2A  
NEW YORK, NY 10023

**FEI Number:** 26-3623850

**Certificate of Status Desired:** No

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

INCORPORATING SERVICES, LTD., INC.  
1540 GLENWAY DRIVE  
TALLAHASSEE, FL 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 BRAUN, JOSEPH  
Address 52 WEST 69TH STREET, APT. 2A  
City-State-Zip: NEW YORK NY 10023

*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:** BRAUN , JOSEPH

**MANAGER**

**02/23/2015**

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

\_\_\_\_\_  
Date