

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000009687

**Entity Name:** GABLES HOME STAGING & MANAGEMENT LLC

**Current Principal Place of Business:**

1172 S. DIXIE HWY  
SUITE 305  
CORAL GABLES, FL 33146

**Current Mailing Address:**

1172 S. DIXIE HWY  
SUITE 305  
CORAL GABLES, FL 33146

**FEI Number:** 26-4269074

**Certificate of Status Desired:** No

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

SANTAYANA, MARISA  
5301 GRANADA BLVD.  
CORAL GABLES, FL 33146 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	Title	MGRM
Name	SANTAYANA, MARISA	Name	SALAS, AURELIO A
Address	1172 SOUTH DIXIE HWY #305	Address	1172 SOUTH DIXIE HWY #305
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146

*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:** MARISA SANTAYANA

**MANAGING MEMBER**

**03/19/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date