

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000079340

**Entity Name:** 818 NARRAGANSETT, LLC

**Current Principal Place of Business:**

12970 PORT SAID ROAD  
OPA LOCKA, FL 33054

**Current Mailing Address:**

12970 PORT SAID ROAD  
OPA LOCKA, FL 33054

**FEI Number:** 27-1325646

**Certificate of Status Desired:** No

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

GAITHER, TIMOTHY E  
12970 PORT SAID ROAD  
OPA LOCKA, FL 33054 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           MM  
Name           JACKSON, BARBARA  
Address        12970 PORT SAID ROAD  
City-State-Zip: OPA LOCKA FL 33054

*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:** BARBARA JACKSON

**MGR**

**04/12/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date