

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000103864

**Entity Name:** SAIL 2605, LLC

**Current Principal Place of Business:**

1901 BRICKELL AV  
UNIT 1613  
MIAMI, FL 33129

**FILED**  
**Feb 09, 2015**  
**Secretary of State**  
**CC3865276832**

**Current Mailing Address:**

CENTRO PROFESIONAL DEL ESTE, PISO 6 NO 61  
CALLE VILLAFLO, SABANA GRANDE  
CARACAS, VE 1050 VE

**FEI Number:** 61-1607362

**Certificate of Status Desired:** No

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

DE LA CRUZ, LUIS F  
4000 PONCE DE LEON BLVD  
STE 790  
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 MGR  
Name MADRIZ, JUAN B  
Address CNTRO PROF DEL ESTE P6  
#61,CALLE VILLAFLO  
City-State-Zip: SABANA GRANDE, CARACAS VE  
1050

Title MGR  
Name DE MADRIZ, ANGELINA M  
Address CNTRO PROF DEL ESTE P6  
#61,CALLE VILLAFLO  
City-State-Zip: SABANA GRANDE, CARACAS VE  
1050

*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:** JUAN B MADRIZ

**MGR**

**02/09/2015**

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

\_\_\_\_\_  
Date