

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000120019

**Entity Name:** SORKIN AND SORKIN PL

**Current Principal Place of Business:**

1535 NORTH PARK DRIVE  
100  
WESTON, FL 33326

**Current Mailing Address:**

1535 NORTH PARK DRIVE  
100  
WESTON, FL 33326

**FEI Number:** 27-1507865

**Certificate of Status Desired:** No

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

ARTHUR PALERMO JR. CPA, PA  
9720 STIRLING ROAD  
203  
COOPER CITY, FL 33024 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 SORKIN, ROBIN R  
Address 1205 MANOR DRIVE SOUTH  
City-State-Zip: WESTON FL 33326

Title MGR  
Name SORKIN, JOHN R  
Address 1205 MANOR DRIVE SOUTH  
City-State-Zip: WESTON FL 33326

*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:** ROBIN S. SORKIN

MGRM

04/08/2014

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

\_\_\_\_\_  
Date