

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000001960

**Entity Name:** CHERYLL SCHECHTMAN'S IRA, LLC

**Current Principal Place of Business:**

235 SUNRISE AVE  
1100  
PALM BEACH, FL 33480

**Current Mailing Address:**

235 SUNRISE AVE  
1100  
PALM BEACH, FL 33480 US

**FEI Number:** 27-1617261

**Certificate of Status Desired:** No

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

SCHECHTMAN, CHERYLL L  
235 SUNRISE AVE  
1100  
PALM BEACH, FL 33480 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 SCHECHTMAN, CHERYLL L  
Address 2397 VIA MARIPOSA W  
3G  
City-State-Zip: LAGUNA WOODS CA 92637

*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:** CHERYLL SCHECHTMAN

**MGR**

**04/16/2015**

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

\_\_\_\_\_  
Date