## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028404

Entity Name: TWINS HOSPITALITY, LLC

**Current Principal Place of Business:** 

6800 BROKEN SOUND PARKWAY 2ND FLOOR

BOCA RATON, FL 33487

## **Current Mailing Address:**

6800 BROKEN SOUND PARKWAY 2ND FLOOR BOCA RATON, FL 33487 US

FEI Number: 90-0544044 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WELLS, TIMOTHY 6800 BROKEN SOUND PARKWAY SUITE 200 BOCA RATON, FL 33487 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

FILED Apr 30, 2014

**Secretary of State** 

CC1263949791

## Authorized Person(s) Detail:

Title MGR

Name WELLS, TIMOTHY

Address 6800 BROKEN SOUND PARKWAY

SUITE 200

City-State-Zip: BOCA RATON FL 33487

SIGNATURE: TIMOTHY WELLS

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.

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

04/30/2014

Date