#### 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. 01/08/2015

MANAGER

SIGNATURE: LYLA TODYWALA

Electronic Signature of Signing Authorized Person(s) Detail

# 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L10000030179

#### Entity Name: TODYWALA FAMILY MANAGEMENT COMPANY, LLC

## **Current Principal Place of Business:**

5340 NORTHWEST 104TH COURT DORAL, FL 33178

## **Current Mailing Address:**

5340 NORTHWEST 104TH COURT DORAL, FL 33178 US

## FEI Number: 27-2147775

## Name and Address of Current Registered Agent:

TODYWALA, SAM E 5340 NORTHWEST 104TH COURT DORAL, FL 33178 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

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	TODYWALA, SAM E	Name	TODYWALA, LYLA
Address	5340 NORTHWEST 104TH COURT	Address	5340 NORTHWEST 104TH COURT
City-State-Zip:	DORAL FL 33178	City-State-Zip:	DORAL FL 33178

Certificate of Status Desired: No

FILED Jan 08, 2015 Secretary of State CC3652374253

Date

Date