

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000050362

**Entity Name:** MOAB 3, LLC

**Current Principal Place of Business:**

7121 NW 6 AVE  
MIAMI, FL 33150

**Current Mailing Address:**

6767 NE 4 AVE  
MIAMI, FL 33138

**FEI Number:** 27-2535050

**Certificate of Status Desired:** No

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

SATER, NADA ESQ  
6767 NE 4 AVE  
MIAMI, FL 33138 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 PST  
Name HACHEM, MOHAMAD  
Address 6767 NE 4TH AVENUE  
City-State-Zip: MIAMI FL 33138

*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:** MOHAMAD HACHEM

**AUTHORIZED OFFICER**

**01/27/2015**

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

\_\_\_\_\_  
Date