

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109347

Entity Name: ADLER ACQUISITION 2, LLC**Current Principal Place of Business:**1400 NW 107 AVENUE
5TH FL
MIAMI, FL 33172**Current Mailing Address:**1400 NW 107 AVENUE
5TH FL
MIAMI, FL 33172**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SMITHER, ROBERT M
1400 N.W. 107TH AVENUE
5TH FL
MIAMI, FL 33172 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	ADLER GROUP, INC.
Address	1400 NW 107 AVENUE, 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

Title	VP/CHAIRMAN
Name	ADLER, MICHAEL M
Address	1400 NW 107 AVENUE, 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

Title	P
Name	ADLER, DAVID
Address	1400 NW 107 AVENUE, 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

Title	EVP
Name	RAIFFE, JONATHAN
Address	1400 NW 107 AVENUE, 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

Title	VP
Name	SMITHER, ROBERT M
Address	1400 NW 107 AVENUE, 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

Title	S, T
Name	SPANO, TINA M
Address	1400 NW 107 AVE 5TH FLOOR
City-State-Zip:	MIAMI FL 33172

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: ROBERT SMITHER

VP

02/25/2014

Electronic Signature of Signing Authorized Person(s) Detail_____
Date