

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121239

**Entity Name:** HILER BUFFALO LLC

**Current Principal Place of Business:**

123 GROVE AVE  
SUITE 222  
CEDARHURST, NY 11516

**Current Mailing Address:**

123 GROVE AVE  
SUITE 222  
CEDARHURST, NY 11516 US

**FEI Number:** 27-4022376

**Certificate of Status Desired:** Yes

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

SPODEK, LEONARD  
9999 COLLINS AVE  
#20K  
BAL HARBOUR, FL 33154 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 SPODEK, LEONARD  
Address 123 GROVE AVE, SUITE 222  
City-State-Zip: CEDARHURST NY 11516

Title MGRM  
Name NATHANSON, JOSEPH  
Address 1044 ELBERON AVE  
City-State-Zip: ELBERON NJ 07740

Title MANAGER  
Name SPODEK, ANDREW  
Address 123 GROVE AVE  
SUITE 222  
City-State-Zip: CEDARHURST NY 11516

*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:** ANDREW SPODEK

**MANAGER**

**01/12/2015**

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

\_\_\_\_\_  
Date