

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L11000016572

**FILED
Dec 09, 2015
Secretary of State
CC6464576010**

Entity Name: VINEYARD GP LLC

Current Principal Place of Business:

120 FORBES BOULEVARD
SUITE 180
MANSFIELD, MA 02048

Current Mailing Address:

120 FORBES BOULEVARD
SUITE 180
MANSFIELD, MA 02048 US

FEI Number: 27-4861849

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOVELL, TERRY M
2200 MUSEUM TOWER
150 W. FLAGLER STREET
MIAMI, FL 33130 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: MANAGER
Name: THE GATEHOUSE GROUP, INC.
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED MEMBER
Name: PLONSKIER, MARC S
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED MEMBER
Name: CANEPARI, DAVID J
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED REPRESENTATIVE
Name: YORKSHAITIS, ROGER
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED REPRESENTATIVE
Name: LEONARDO, CHRISTOPHER
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED REPRESENTATIVE
Name: INAMDAR, NIKUL A
Address: 445 NW 4TH STREET
SUITE 108
City-State-Zip: MIAMI FL 33128-1701

Title: AUTHORIZED REPRESENTATIVE
Name: HAMPTON, SARITA D
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

Title: AUTHORIZED REPRESENTATIVE
Name: LEO, JENNIFER S
Address: 120 FORBES BOULEVARD
SUITE 180
City-State-Zip: MANSFIELD MA 02048

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: MARC S PLONSKIER

MGRM

12/09/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date