2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000034977

Entity Name: BRICKELL CITY CENTRE PLAZA LLC

Current Principal Place of Business:

501 BRICKELL KEY DRIVE, SUITE 600 MIAMI, FL 33131

Current Mailing Address:

501 BRICKELL KEY DRIVE, SUITE 600 MIAMI. FL 33131

FEI Number: APPLIED FOR Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOLAND, GREGG E 501 BRICKELL KEY DRIVE SUITE 600 MIAMI, FL 33131 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

FILED Feb 25, 2014

Secretary of State

CC1367894085

Authorized Person(s) Detail:

Title CEO Title PAS

CUBBON, MARTIN OWENS, STEPHEN L Name Name

Address 501 BRICKELL KEY DRIVE, SUITE 600 Address 501 BRICKELL KEY DRIVE, SUITE 600

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title **VTS** Title

Name KELLY, J. MEGAN Name TOLAND, GREGG E

501 BRICKELL KEY DRIVE, SUITE 600 Address 501 BRICKELL KEY DRIVE, SUITE 600 Address

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title Title AS

GANDOLFO, CHRIS MCMAIN, BEVERLEY Name Name

501 BRICKELL KEY DRIVE, SUITE 600 Address 501 BRICKELL KEY DRIVE, SUITE 600 Address

City-State-Zip: City-State-Zip: MIAMI FL 33131 MIAMI FL 33131

SIGNATURE: STEPHEN L. OWENS

02/25/2014

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.