

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000045042

**Entity Name:** RESIDENCE 28 LLC

**Current Principal Place of Business:**

C/O MARTA COCCONCELLI  
450 ALTON RD., APT. 2901  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

C/O MARTA COCCONCELLI  
450 ALTON RD., APT. 2901  
MIAMI BEACH, FL 33139

**FEI Number:** 45-1679492

**Certificate of Status Desired:** No

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

COCCONCELLI, MARTA  
450 ALTON RD., APT. 2901  
MIAMI BEACH, FL 33139 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 S. PELLEGRINO IRREVOCABLE TRUST  
Address C/O MARTA COCCONCELLI, 450 ALTON RD, #2901  
City-State-Zip: MIAMI BEACH FL 33139

*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:** MARTA COCCONCELLI

MGRM

03/19/2015

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

\_\_\_\_\_ Date