

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000119231

Entity Name: GROVE BLUFF, LLC

Current Principal Place of Business:

900 SW 80 CT
MIAMI, FL 33144-4230

Current Mailing Address:

P.O. BOX 440427
MIAMI, FL 33144-0427 US

FEI Number: 45-4722807

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PASCUAL, ADALBERTO M
900 SW 80 CT
MIAMI, FL 33144-4230 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 PASCUAL, ADALBERTO M
Address P.O. BOX 440427
City-State-Zip: MIAMI FL 33144-0427

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: ADALBERTO M PASCUAL

MANAGER

02/03/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date