

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000122659

**Entity Name:** NEXUS\_LIVING III, LLC

**Current Principal Place of Business:**

13431 OLD SHERIDAN STREET  
SOUTHWEST RANCHES, FL 33330

**Current Mailing Address:**

13431 OLD SHERIDAN STREET  
SOUTHWEST RANCHES, FL 33330

**FEI Number:** 45-3722778

**Certificate of Status Desired:** No

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

RIFKIN, ELIOT WESQ.  
DADELAND TOWERS SOUTH, SUITE 600  
9400 SOUTH DADELAND BLVD.  
MIAMI, FL 33156 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 MGR  
Name ROSES, TOMAS A  
Address 13431 OLD SHERIDAN STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33330

Title MGR  
Name ROMERO-ROSES, GLORIA  
Address 13431 OLD SHERIDAN STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33330

Title MGR  
Name TITLEMAN, STEPHAN R  
Address 13431 OLD SHERIDAN STREET  
City-State-Zip: SOUTHWEST RANCHES FL 33330

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GLORIA ROMERO-ROSES

MGR

03/25/2013

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

\_\_\_\_\_  
Date