

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000140505

Entity Name: KSY 157, L.L.C.

Current Principal Place of Business:

2555 PONCE DE LEON BLVD,
C/O SULLIVAN, ADMIRE & SULLIVAN SUITE 320
CORAL GABLES , FL 33134

Current Mailing Address:

2555 PONCE DE LEON BLVD,
C/O SULLIVAN, ADMIRE & SULLIVAN SUITE 320
CORAL GABLES , FL 33134 US

FEI Number: 61-1581896

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ADMIRE , JOHN G ESQ.
2555 PONCE DE LEON BLVD,
C/O SULLIVAN, ADMIRE & SULLIVAN SUITE 320
CORAL GABLES , FL 33134 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: JOHN G ADMIRE

01/15/2015

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title CHAIRMAN
Name KWAN , LUISA
Address 2555 PONCE DE LEON BLVD,
C/O SULLIVAN, ADMIRE & SULLIVAN SUITE 320
City-State-Zip: CORAL GABLES FL 33134

Title MANAGER
Name KWAN , KRISTINE B
Address 2555 PONCE DE LEON BLVD,
C/O SULLIVAN, ADMIRE & SULLIVAN SUITE 320
City-State-Zip: CORAL GABLES FL 33134

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: KRISTINE KWAN

MANAGER

01/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date