

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000040912

**Entity Name:** CG TIDES VILLAGE LLC

**Current Principal Place of Business:**

2915 BISCAYNE BLVD.  
SUITE 300  
MIAMI, FL 33137

**Current Mailing Address:**

2915 BISCAYNE BLVD.  
SUITE 300  
MIAMI, FL 33137 US

**FEI Number:** 45-5560611

**Certificate of Status Desired:** No

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

LIEBER, OREN ESQ.  
2915 BISCAYNE BLVD.,  
SUITE 300  
MIAMI, FL 33137 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 392 FIFTH LLC  
Address 512 7TH AVE - 15TH FLOOR  
City-State-Zip: NEW YORK NY 10018

*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:** JOSEPH CHETRIT

MGR

03/11/2016

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

\_\_\_\_\_  
Date