#### 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000051146

Entity Name: ORDER MAGIC LLC

**Current Principal Place of Business:** 

1444 BISCAYNE BLVD. SUITE 225

MIAMI, FL 33132

FILED
Jun 09, 2014
Secretary of State
CC5652111305

### **Current Mailing Address:**

1444 BISCAYNE BLVD. SUITE 225 MIAMI, FL 33132 US

FEI Number: 45-5053487 Certificate of Status Desired: Yes

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

RATHMAN, JOHN 1444 BISCAYNE BLVD. SUITE 225 MIAMI, FL 33132 US

City-State-Zip:

City-State-Zip:

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 RATHMAN 06/09/2014

Electronic Signature of Registered Agent Date

### Authorized Person(s) Detail:

TitleMANAGING MEMBERTitleMANAGING MEMBERNameRATHMAN, JOHN FNameELIA, MICHELLEAddress1444 BISCAYNE BLVD.Address1444 BISCAYNE BLVD.

SUITE 225

SUITE 225

MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

TitleAUTHORIZED MEMBERTitleAUTHORIZED MEMBERNameELIA, MICHAEL, SR.NameELIA, MICHAEL, JR.Address1444 BISCAYNE BLVD.Address1444 BISCAYNE BLVD.

SUITE 225

SUITE 225

SOITE 2.

MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

 Title
 AUTHORIZED MEMBER
 Title
 AUTHORIZED MEMBER

 Name
 BRYAN, KEN
 Name
 SYRACUSE, DANIEL

Address 1444 BISCAYNE BLVD. Address 1444 BISCAYNE BLVD.

SUITE 225 SUITE 225

City-State-Zip: MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

 Title
 AUTHORIZED MEMBER
 Title
 AUTHORIZED MEMBER

 Name
 SYRACUSE, ROBERT
 Name
 COLUCCI, DOMINIC, SR.

 Address
 1444 BISCAYNE BLVD.
 Address
 1444 BISCAYNE BLVD.

SUITE 225 SUITE 225

City-State-Zip: MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

## Continues on page 2

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: JOHN F. RATHMAN MANAGING MEMBER/CEO 06/09/2014

# **Authorized Person(s) Detail Continued:**

Title AUTHORIZED MEMBER Title AUTHORIZED MEMBER

Name COLUCCI, DOMINIC, JR. Name ELIA, JENNIFER

1444 BISCAYNE BLVD. 1444 BISCAYNE BLVD. Address Address SUITE 225

SUITE 225

City-State-Zip: MIAMI FL 33132 City-State-Zip: MIAMI FL 33132

Title **AUTHORIZED MEMBER** 

Address 1444 BISCAYNE BLVD.

SUITE 225

ELIA, JESSICA

City-State-Zip: MIAMI FL 33132

Name