

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000094125

Entity Name: LC CAJFL, LLC

Current Principal Place of Business:

1601 5TH AVENUE, SUITE 1900
SEATTLE, WA 98101

Current Mailing Address:

1601 5TH AVENUE, SUITE 1900
SEATTLE, WA 98101

FEI Number: 46-0620346

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD., INC.
155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301 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 LEISURE CARE, LLC
Address 1601 5TH AVENUE, SUITE 1900
City-State-Zip: SEATTLE WA 98101

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: SCOTT BILLBE

VP & CONTROLLER

01/09/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date