

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000115506

**Entity Name:** SAVEMYMITZVAHDATE.COM, LLC

**Current Principal Place of Business:**

100 SOUTH BISCAYNE BLVD.  
900 - ATTN: JH  
MIAMI, FL 33131

**FILED**  
**Mar 12, 2014**  
**Secretary of State**  
**CC0749894179**

**Current Mailing Address:**

100 SOUTH BISCAYNE BLVD.  
SUITE 900- ATTN: JH  
MIAMI, FL 33131 US

**FEI Number:** 46-2281666

**Certificate of Status Desired:** No

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

JEFFREY M. OSHINSKY, P.A.  
20900 NE 30TH AVENUE  
SUITE 600  
AVENTURA, FL 33180 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 OSHINSKY, STEPHANIE  
Address 3696 NE 199TH STREET  
City-State-Zip: AVENTURA FL 33180

Title MGRM  
Name HOLLO, BETTINA  
Address 100 SOUTH BISCAYNE BLVD.  
900  
City-State-Zip: MIAMI FL 33131

*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:** BETTINA HOLLO

**MANAGER**

**03/12/2014**

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

\_\_\_\_\_  
Date