

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000133368

**Entity Name:** USA SPECIALIZED MANAGEMENT LLC

**Current Principal Place of Business:**

2355 SW 18TH AVENUE  
FORT LAUDERDALE, FL 33315

**Current Mailing Address:**

PO BOX 21372  
FORT LAUDERDALE, FL 33335 US

**FEI Number:** 46-1277435

**Certificate of Status Desired:** No

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

SPECIALIZED MANAGEMENT  
7000 SW 23RD COURT  
DAVIE, FL 33317 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 LONG, NANCY  
Address P.O. BOX 21372  
City-State-Zip: FORT LAUDERDALE FL 33335

*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:** NANCY LONG

MANAGER

03/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date