

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000152102

**Entity Name:** 1001 PONCE DE LEON, LLC

**Current Principal Place of Business:**

4725 SW 8 STREET  
MIAMI, FL 33134

**Current Mailing Address:**

4725 SW 8 STREET  
MIAMI, FL 33134

**FEI Number:** 46-1514711

**Certificate of Status Desired:** No

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

SARRIA, FRANCISCO  
4725 SW 8 STREET  
MIAMI, FL 33134 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	Title	MGRM
Name	SARRIA, FRANCISCO	Name	SARRIA, RICARDO
Address	4725 SW 8 STREET	Address	4725 SW 8 STREET
City-State-Zip:	MIAMI FL 33134	City-State-Zip:	MIAMI FL 33134

*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:** FRANCISCO SARRIA

MGRM

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date