## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000031233

**Entity Name: WAREHOUSE MANAGER LLC** 

**Current Principal Place of Business:** 

18205 BISCAYNE BOULEVARD

**SUITE 2202** 

AVENTURA, FL 33160

**Current Mailing Address:** 

18205 BISCAYNE BOULEVARD SUITE 2202

AVENTURA, FL 33160

FEI Number: 46-2170750 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GROSFELD, MARIO 18205 BISCAYNE BOULEVARD SUITE 2202 AVENTURA, FL 33160 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: MARIO GROSFELD 03/21/2016

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name AMOILS, DENNIS Name LUDMIR, IAN

Address 18205 BISCAYNE BOULEVARD, SUITE Address 18660 COLLINS AVENUE, SUITE 107

City-State-Zip: SUNNY ISLES BEACH FL 33160

City-State-Zip: AVENTURA FL 33160

Title MGR

Name GROSFELD, MARIO

Address 18205 BISCAYNE BOULEVARD, SUITE

2202

City-State-Zip: AVENTURA FL 33160

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: MARIO GROSFELD

Electronic Signature of Signing Authorized Person(s) Detail

RA 03/21/2016

FILED Mar 21, 2016

**Secretary of State** 

CC3413409989

Date