# 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.

PRESIDENT

SIGNATURE: NICOLAOS PARASKEVAS

Electronic Signature of Signing Authorized Person(s) Detail

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000055841

Entity Name: MAHOGANY ISLES 85 LLC

### **Current Principal Place of Business:**

14816 SW 104 ST 85 MIAMI, FL 33196

#### **Current Mailing Address:**

956 SW 148 PLACE MIAMI, FL 33194

## FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

PARASKEVAS, NICOLAOS 14816 SW 104 ST 85 MIAMI, FL 33196 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.

OS PARASKEVAS			02/04/2015
Signature of Registered Agent			Date
Detail :			
	Title	VP	
AS, NICOLAOS	Name	GRATEROL, NAISA	
Address 14816 SW 104 ST 85 City-State-Zip: MIAMI FL 33196	Address	14816 SW 104 ST	
	City-State-Zip:	MIAMI FL 33196	
	Signature of Registered Agent Detail : AS, NICOLAOS 04 ST	Signature of Registered Agent Detail : Title AS, NICOLAOS Name 04 ST Address City-State-Zip:	Signature of Registered Agent Detail : Title VP AS, NICOLAOS Name GRATEROL, NAISA 04 ST Address 14816 SW 104 ST City-State-Zip: MIAMI FL 33196

rrent Registered Agent:

Certificate of Status Desired: No

FILED Feb 04, 2015 Secretary of State CC7236900083

> 02/04/2015 Date