

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000133318

**Entity Name:** ATRAM 418 LLC

**Current Principal Place of Business:**

1806 OLD OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33409

**Current Mailing Address:**

POB 880727  
BOCA RATON, FL 33488

**FEI Number:** 46-3699113

**Certificate of Status Desired:** No

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

COHN, BENNETT S  
1806 OLD OKEECHOBEE ROAD  
WEST PALM BEACH, FL 33409 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 SEGAL, IVAN  
Address POB 880727  
City-State-Zip: BOCA RATON FL 33488

*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:** IVAN SEGAL

MANAGER

04/21/2016

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

\_\_\_\_\_ Date