

2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000139511

FILED
Oct 15, 2015
Secretary of State
CC7037695740

Entity Name: AIYARA, LLC

Current Principal Place of Business:

3470 NW 82ND AVENUE, SUITE 988
DORAL, FL 33122

Current Mailing Address:

3470 NW 82ND AVENUE, SUITE 988
DORAL, FL 33122 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SILVERMAN, LAWRENCE D
10725 GRIFFING BLVD.
BISCAYNE PARK, FL 33161 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 ARREERATN, PIYARAT
Address 800 SOUTH RAINBOW DRIVE
City-State-Zip: HOLLYWOOD FL 33021

Title MEMBER
Name TCS PRIVATE EQUITY III, LLC –
SERIES 30
Address ONE NORTH WACKER DRIVE, SUITE
3605
City-State-Zip: CHICAGO IL 60606

Title MEMBER
Name ARREERATN, PIYARAT
Address 800 SOUTH RAINBOW DRIVE
City-State-Zip: HOLLYWOOD FL 33021

Title MEMBER
Name ADVANTAIRA TRUST, LLC FBO
LAWRENCE D SILVERMAN IRA
7343301
Address 10725 GRIFFING BLVD.
City-State-Zip: BISCAYNE PARK FL 33161
Title MEMBER
Name SHOMA WORLD ENTERTAINMENT,
LLC
Address 3470 NW 82ND AVENUE, SUITE 988
City-State-Zip: DORAL FL 33122

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: LAWRENCE SILVERMAN

MEMBER

10/15/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date