

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000142527

**Entity Name:** ELIE DAN CLIFTON, LLC

**Current Principal Place of Business:**

C/O ELIEZER MENDELSON  
6000 ISLAND BLVD APT 1403  
AVENTURA, FL 33160

**Current Mailing Address:**

C/O ELIEZER MENDELSON  
6000 ISLAND BLVD APT 1403  
AVENTURA, FL 33160

**FEI Number:** 46-3900389

**Certificate of Status Desired:** No

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

MENDELSON, ELIEZER  
6000 ISLAND BLVD APT 1403  
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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MENDELSON, ELIEZER  
Address 6000 ISLAND BLVD APT 1403  
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:** ELIEZER MENDELSON

MEMBER

01/21/2015

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

\_\_\_\_\_  
Date