

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000020276

**Entity Name:** HIPI INVESTMENTS LLC**Current Principal Place of Business:**2601 SOUTH BAYSHORE DRIVE, SUITE 1200  
COCONUT GROVE, FL 33133**Current Mailing Address:**2601 SOUTH BAYSHORE DRIVE, SUITE 1200  
COCONUT GROVE, FL 33133**FEI Number:** 46-4754558**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**M.J.F. REGISTERED AGENT CORP  
153 SEVILLA AVENUE  
CORAL GABLES, FL 33134 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 AMBR  
Name HORN, JOSEPH TRUSTEE  
Address 2601 SOUTH BAYSHORE DRIVE,  
SUITE 1200  
City-State-Zip: COCONUT GROVE FL 33133

Title MGR  
Name HORN, JOSEPH  
Address 2601 SOUTH BAYSHORE DRIVE,  
SUITE 1200  
City-State-Zip: COCONUT GROVE FL 33133

Title AMBR  
Name BRAGHIN, FERNANDO  
Address 2601 SOUTH BAYSHORE DRIVE,  
SUITE 1200  
City-State-Zip: COCONUT GROVE FL 33133

Title AMBR  
Name GREENWALD, ALLEN TRUSTEE  
Address 7301 SW 57TH COURT  
SUITE 565  
City-State-Zip: SOUTH MIAMI FL 33143

Title MGR  
Name GREENWALD, ALLEN R  
Address 7301 SW 57 COURT STE 565  
City-State-Zip: SOUTH MIAMI FL 33143

Title AMBR  
Name GREENWALD, ALLEN TRUSTEE  
Address 7301 SW 57TH COURT  
SUITE 565  
City-State-Zip: SOUTH MIAMI FL 33143

Title MGR  
Name HORN, JOSEPH  
Address 2601 SOUTH BAYSHORE DRIVE,  
SUITE 1200  
City-State-Zip: COCONUT GROVE FL 33133

Title AMBR  
Name BRAGHIN, FERNANDO  
Address 2601 SOUTH BAYSHORE DRIVE,  
SUITE 1200  
City-State-Zip: COCONUT GROVE FL 33133

*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:** FERNANDO BRAGHIN

AMBR

04/13/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date