

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000140300

Entity Name: DORAL 505 LLC

Current Principal Place of Business:

10710 NW 66 ST
505
DORAL, FL 33178

Current Mailing Address:

10710 NW 66 ST
505
DORAL, FL 33178

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TOTALCORP BUSINESS CONSULTANTS, CORP
1825 MAIN ST
WESTON, FL 33326 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 ORNYROD INVESTMENT, LLC
Address 10710 NW 66 ST, # 505
City-State-Zip: DORAL FL 33178

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: ORNYROD INVESTMENT, LLC

AMBR

04/25/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date