

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000156149

**FILED**  
**Mar 29, 2016**  
**Secretary of State**  
**CC2337704312**

**Entity Name:** 2100 WEST CYPRESS CREEK MANAGER, LLC

**Current Principal Place of Business:**

150 SE 2ND AVE  
STE 800  
MIAMI, FL 33131

**Current Mailing Address:**

150 SE 2ND AVE  
STE 800  
MIAMI, FL 33131 US

**FEI Number:** 47-2021264

**Certificate of Status Desired:** No

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

BCRA, LLC  
7777 GLADES RD  
STE 300  
BOCA RATON, FL 33434 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 BALLESTAS, VICTOR  
Address 150 SE 2ND AVE - STE 800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name STABILE, NELSON  
Address 150 SE 2ND AVE - STE 800  
City-State-Zip: MIAMI FL 33131

Title MGR  
Name DE MELO, PAULO T  
Address 150 SE 2ND AVE - STE 800  
City-State-Zip: MIAMI FL 33131

*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:** NELSON STABILE

**MANAGER**

**03/29/2016**

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

\_\_\_\_\_  
Date