

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000072307

Entity Name: SHEMESH I, LLC**Current Principal Place of Business:**2121 PONCE DE LEON BLVD 11TH FLOOR
CORAL GABLES, FL 33134**Current Mailing Address:**2121 PONCE DE LEON BLVD 11TH FLOOR
CORAL GABLES, FL 33134**FEI Number:** 37-1789048**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410 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	MRG
Name	BYSKUBIEZ, JUDITH L
Address	2121 PONCE DE LEON BLVD 11TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

Title	MRG
Name	MATERYN, EDUARDO D
Address	2121 PONCE DE LEON BLVD 11TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

Title	MRG
Name	MATERYN, VALERIA A
Address	2121 PONCE DE LEON BLVD 11TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

Title	MRG
Name	MATERYN, DIEGO A
Address	2121 PONCE DE LEON BLVD 11TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

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: JUDITH L BYSKUBIEZ ,**MANAGER****04/25/2016**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date