2016 FLORIDA LIMITED LIABILI	TY COMPANY ANNUAL REPORT

DOCUMENT# L15000099809

Entity Name: 322 HENDRICKS ISLE, LLC

## **Current Principal Place of Business:**

2426 EAST LAS OLAS BOULEVARD FORT LAUDERDALE, FL 33301

## **Current Mailing Address:**

2426 EAST LAS OLAS BOULEVARD FORT LAUDERDALE, FL 33301 US

## FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

HOFFMAN, STEPHEN V 2426 EAST LAS OLAS BOULEVARD FORT LAUDERDALE, FL 33301 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	STEPHEN V HOFFMAN		-	04/30/2016
	Electronic Signature of Registered Agent			Date
Authorized I	Person(s) Detail :			
Title	MGR	Title	Μ	
Name	CASABLANCA, EDGAR	Name	CASABLANCA, MONIQUE	
Address	5700 ARLINGTON AVE., #18U	Address	5700 ARLINGTON AVE., #18U	
City-State-Zip:	BRONX NY 10471	City-State-Zip:	BRONX NY 10471	
Title	М	Title	М	
Name	CASABLANCA, BIANCA	Name	CASABLANCA, EDGAR BRIAN	
Address	5700 ARLINGTON AVE., #18U	Address	5700 ARLINGTON AVE., #18U	
City-State-Zip:	BRONX NY 10471	City-State-Zip:	BRONX NY 10471	
Title	Μ			
Name	CASABLANCA, AARON			
Address	5700 ARLINGTON AVE., #18U			
City-State-Zip:	BRONX NY 10471			

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: EDGAR CASABLANCA

MANAGER

04/30/2016 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 30, 2016 Secretary of State CC7601183546

Certificate of Status Desired: No