

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L98000001244

**Entity Name:** 330 WEST ASSOCIATES HIALEAH, L.L.C.

**Current Principal Place of Business:**

22 MAPLE AVENUE  
MORRISTOWN, NJ 07960

**Current Mailing Address:**

22 MAPLE AVENUE  
MORRISTOWN, NJ 07960 US

**FEI Number:** 22-3641855

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	MGRM	Title	AUTHORIZED REPRESENTATIVE
Name	330 WEST HIALEAH, INC.	Name	AMORE, JANET
Address	15 MAPLE AVENUE	Address	22 MAPLE AVENUE
City-State-Zip:	MORRISTOWN NJ 07960	City-State-Zip:	MORRISTOWN NJ 07960

*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:** JANET AMORE

**AUTHORIZED  
REPRESENTATIVE**

**06/26/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date