

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M06000006523

**Entity Name:** DORAL WEST ACQUISITION LLC

**Current Principal Place of Business:**

270 PARK AVENUE, 7TH FLOOR  
NEW YORK, NY 10017

**Current Mailing Address:**

P.O. BOX 5005  
NEW YORK, NY 10163 US

**FEI Number:** 20-5909107

**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  
Name COMMINGLED PENSION TRUST FUND  
(STRATEGIC P  
Address P.O. BOX 5005  
City-State-Zip: NEW YORK NY 10163

*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:** ETHEL GAVRILOVA

ON FILE WITH MEMBER

01/30/2014

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

\_\_\_\_\_  
Date