

2015 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M09000002475

Entity Name: DORAL N1 PHASE LLC

Current Principal Place of Business:

245 PARK AVE
2ND FLOOR
NEW YORK, NY 10167

Current Mailing Address:

PO BOX 5005
NEW YORK, NY 10163

FEI Number: APPLIED FOR

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 CM DORAL BUILDINGS, LLC
Address 135 SAN LORENZO AVENUE, SUITE
750
City-State-Zip: CORAL GABLES FL 33146

Title P
Name BARLICK, ANA-MARIE C
Address 135 SAN LORENZO AVE STE 750
City-State-Zip: CORAL GABLES FL 33146

Title VP
Name ROMERO, RAFAEL G
Address 135 SAN LORENZO AVE STE 750
City-State-Zip: CORAL GABLES FL 33146

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: ANA-MARIE CODINA BARLICK

PRES

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date