

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M09000002478

**Entity Name:** DORAL Q1 PHASE LLC

**Current Principal Place of Business:**

245 PARK AVE  
2ND FLOOR  
NEW YORK, NY 10167

**Current Mailing Address:**

245 PARK AVE  
2ND FLOOR  
NEW YORK, NY 10167

**FEI Number:** 27-0425699

**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	P
Name	CM DORAL BUILDINGS, LLC	Name	GRAGG, K. LAWRENCE
Address	135 SAN LORENZO AVE. SUITE 750	Address	135 SAN LORENZO AVENUE STE 750
City-State-Zip:	CORAL GABLES FL 33146	City-State-Zip:	CORAL GABLES FL 33146
Title	V		
Name	CODINA BARLICK, ANA-MARIE		
Address	135 SAN LORENZO AVENUE 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:** K. LAWRENCE GRAGG

VP

03/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date