

2015 FOREIGN LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# B13000000357

**FILED
Mar 24, 2015
Secretary of State
CC0897415855**

Entity Name: RING BENDER MCKOWN & CASTILLO LLLP

Current Principal Place of Business:

ONE ALHAMBRA PLAZA
SUITE 620
CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 140848
CORAL GABLES, FL 33114

FEI Number: 45-5024290

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CASTILLO, CARLOS B
ONE ALHAMBRA PLAZA
SUITE 620
CORAL GABLES, FL 33134 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: CARLOS B. CASTILLO

03/24/2015

Electronic Signature of Registered Agent

Date

General Partner Detail :

Document #
Name CARLOS B. CASTILLO, P.A.
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

Document #
Name LE PETIT JURISTE LTD
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

Document #
Name HEIN, CHRISTINE L
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

Document #
Name RING, JEFFERY W
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

Document #
Name AARON M MCKOWN PA
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

Document #
Name BENDER, PHILLIP M
Address ONE ALHAMBRA PLAZA, SUITE 620
City-State-Zip: CORAL GABLES FL 33134

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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CARLOS B. CASTILLO

PARTNER

03/24/2015

Electronic Signature of Signing General Partner Detail

Date