

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000019022

**Entity Name:** FEGADUR, LLC**Current Principal Place of Business:**1901 BRICKELL AVENUE  
B-1901  
MIAMI, FL 33129**Current Mailing Address:**1901 BRICKELL AVENUE  
B-1901  
MIAMI, FL 33129**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAFONTISEE, LOUIS LJR.  
3121 COMMODORE PLAZA  
SUITE 301  
MIAMI, FL 33133 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 MGR  
Name GARCIA, IGNACIO  
Address 1901 BRICKELL AVE #B-1901  
City-State-Zip: MIAMI FL 33129

Title MGRM  
Name INIGO, PILAR ECHEVARR  
Address C/SANTA QUITERIA #16  
City-State-Zip: 08188 VALLROMES BAR. SPAIN

Title MGRM  
Name GARCIA ECHEVARRIETA, ANDRES  
Address C/SANTA QUITERIA #16  
City-State-Zip: 08188 VALLROMES BAR. SPAIN

Title MGRM  
Name GARCIA DURAN, LUIS FERNANDO  
Address C/SANTA QUITERIA #16  
City-State-Zip: 08188 VALLROMANES BAR. SPAIN

Title MGRM  
Name GARCIA ECHEVARRIETA, BORJA  
Address C/SANTA QUITERIA #16  
City-State-Zip: 08188 VALLROMES BAR. SPAIN

Title MGRM  
Name GARCIA ECHEVARRIETA, ALEJANDRO  
Address C/SANTA QUITERIA #16  
City-State-Zip: 08188 VALLROMES BAR. SPAIN

*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:** IGNACIO GARCIA**MANAGER****01/19/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date