

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000014204

**Entity Name:** Q4, LLC**Current Principal Place of Business:**2701 S. LE JEUNE RD.  
12TH FLOOR  
CORAL GABLES, FL 33134**Current Mailing Address:**P O BOX 144120  
MIAMI, FL 33134 US**FEI Number:** 20-0761962**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RICH, MARK D ESQ.  
355 ALHAMBRA CIRCLE  
SUITE 801  
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:** MARK D, RICH

04/25/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM
Name	QUIRCH, GUILLERMO III
Address	2701 S. LE JEUNE RD. 12TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

  

Title	MGRM
Name	QUIRCH, MAURICIO
Address	2701 S. LE JEUNE RD. 12TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

Title	MGRM
Name	QUIRCH, IGNACIO
Address	2701 S. LE JEUNE RD. 12TH FLOOR
City-State-Zip:	CORAL GABLES FL 33134

  

Title	MGRM
Name	QUIRCH, MARIANA
Address	2701 S. LE JEUNE RD. 12TH FLOOR
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 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:** GUILLERMO QUIRCH III

MANAGER

04/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date