

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040170

**Entity Name:** FAMEX, LLC

**Current Principal Place of Business:**

16047 COLLINS AVE  
UNIT 2502S  
SUNNY ISLES, FL 33160

**Current Mailing Address:**

C/O DJM ABOGADOS BOSQUES DE ALISOS 13, OF 1 (PB), CUAJIMALPA  
MEXICO CITY, 05120 MX

**FEI Number:** 20-2825813

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CAPITOL CORPORATE SERVICES, INC.  
515 EAST PARK AVENUE  
2ND FL  
TALLAHASSEE, FL 32301 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:** DELANIE CASE

05/01/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            MANAGER  
Name            SALINAS, JUAN JOSE  
Address        16047 COLLINS AVE  
                  UNIT 2502S  
City-State-Zip: SUNNY ISLES FL 33160

Title            MANAGER  
Name            KURI, JIMENA ALONSO  
Address        16047 COLLINS AVE  
                  UNIT 2502S  
City-State-Zip: SUNNY ISLES FL 33160

*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:** JUAN JOSE SALINAS

MANAGER

05/01/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date