## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000100452

Entity Name: NAVICON UNLIMITED, LLC

**Current Principal Place of Business:** 

8550 NW 17 STREET SUITE 110A DORAL, FL 33126

**FILED** Apr 28, 2014 **Secretary of State** CC5849143938

## **Current Mailing Address:**

8550 NW 17 STREET SUITE 110A DORAL, FL 33126 US

FEI Number: 20-3626668 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

DEL REY, ALICIA 8550 NW 17 STREET SUITE 110A DORAL, FL 33126 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: DEL REY ALICIA 04/28/2014

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MGR, PRESIDENT Title MGR, TREASURER, SECRETARY

Name ZANZOTTERA, GUSTAVO Name YANEZ, GABRIEL Address

8550 NW 17 STREET 8550 NW 17 STREET Address SUITE 110A SUITE 110A

City-State-Zip: DORAL FL 33126 City-State-Zip: DORAL FL 33126

Title MGR, VP Title **MGRM** 

Name DEL REY, ALICIA Name NAVICON INTERNATIONAL, LLC

Address 8550 NW 17 STREET Address 8550 NW 17 STREET

SUITE 110A SUITE 110A

City-State-Zip: DORAL FL 33126 City-State-Zip: DORAL FL 33126

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.